Exploring the Cultural Use of Indigenous Healing Cosmologies in the Management of Historical and Intergenerational Trauma Amongst the Xhosa-speaking people of South Africa

by

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“Declaration"

By submitting this dissertation, I declare that the work contained in this thesis is my own original work, researched and written by myself at Rhodes University. I have not previously submitted it for obtaining any qualification.

Thandokazi Queeny May

Date: June 2025

Abstract

Research on the trauma experienced by indigenous populations that have undergone colonization has found that colonialism has had a devastating effect on the wellbeing of these indigenous people in both historical and present-day contexts. This thesis aimed to identify the indigenous healing cosmologies used in the management of trauma by Xhosa-speaking people, who are a South African indigenous group that has historically experienced colonialism. This research engaged historical trauma (HT) theory and intergenerational trauma (IGT) theory, based on the premise that populations historically subjected to long-term, mass trauma such as colonialism, war and genocide exhibit a higher prevalence of disease and mental distress even several generations after the original trauma occurred. The psychological and emotional consequences of the initial trauma experience are transmitted inter-generationally with subsequent generations experiencing vicarious traumatization through the collective memory of the population.

Data-gathering methods included extended participant observation within the community, alongside autoethnographic reflection on my own position as a Xhosa-speaking indigenous healer and community member. Extended interviews also took place with a wider network of traditional healers in the Eastern Cape, who also work with communities in the study area. In addition, I drew on methodologies which utilize dreaming and engagement with ancestral entities as a keyway of ‘coming to know’ in alignment with indigenous knowledge systems in this region.

This study found that Xhosa-speaking people manage trauma by utilising various strategies including dreaming and spirituality to regain the balance of relationships that have been undermined by trauma. This approach is based on the indigenous Xhosa health model that defines health as a state of balanced relationships between the self, family, community, ancestors and environment. When these relationships are compromised, illness results. This finding aligns with that of Ward (2023) who found that indigenous dreaming and spirituality brings healing, greater resilience, and has the power to heal trauma. This study found that spiritual knowledge in Xhosa communities is used as a methodology for understanding humanity (Ubuntu) and maintaining balanced relationships thereby maintaining health. However, there are significant barriers to resolving historical and intergenerational trauma within Xhosa communities due to the magnitude of social disruption that has occurred and the impact these disruptions have had on indigenous healing modalities. This thesis proposes

the concept that Ubuntu can be utilized as a strategy for managing trauma, through the adoption of the Xhosa indigenous health model that places emphasis on indigenous approaches to gathering knowledge that are supported by teachings from the ancestors**.** Amongst indigenous communities, trauma is experienced collectively, hence healing trauma and lifting the burden of disease caused by traumatization requires collective consciousness that is grounded in indigenous cosmologies.

Keywords: historical trauma, intergenerational trauma, indigenous knowledge systems, healing cosmologies, Xhosa, South Africa

“Dedication”

I dedicate this thesis to my ancestors Ntshanga, Ndlandla, Mthimanzi, Mbulawa, Maliwakubi, mathungela enkundleni inkomo zizale amathokazi, Mbokazi, Nozulu, Mpafana, Thukela, Mchumane, Mpangazitha, Kheswa, Sithathu, Chisana, Kopoyi, Ndebe, Lawu, Nkomozibomvu, Jola, Mpondomise, Mphankomo, Thole lomthwakazi, Qingemba, Dlamini, Jama kaSjadu, Ndlovu, Mtungwa, Mpinga, Mawawa, Balakaqoshe, Senzwa, Ntomntwana,

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Glossary of key terms .

amaXhosa – the Xhosa-speaking people of South Africa

isiXhosa – the language spoken by the amaXhosa people of South Africa

Ukuthwasa – the process of becoming a traditional healer

iGqirha- a diviner

iTola – a trauma specialist

Indumba – sacred hut where traditional healers consult with patients

Qamata – the Creator in Xhosa cosmology

Izinyanya or izihlwele – the ancestors

amaMfengu, amaGqunukhwebe – the cultural groups of Peddie

Gonaqua Khoi – a cultural group of South Africa (other sources use Khoe or KhoiKhoi)

Sotho – a cultural group of (South Africa and Lesotho)

Rand – South African currency

Makhanda (formerly Grahamstown) – town in the Eastern Cape province of South Africa

Peddie (also called eNqushwa) – a town in the Eastern Cape province of South Africa

CHAPTER 1: Introducing the Study

1.1 Introduction

The day was the 12th of November 2019, the day of my 29th birthday and I was sitting in my indumba (sacred hut) contemplating how I was going to spend the last birthday of my twenties. It had been both an eventful and rough year for me, as earlier in the year in January I graduated from traditional medical school to become a traditional healer known in isiXhosa as iGqirha. I completed a graduation ceremony once more in April, this time for my master's degree in pharmacology from Stellenbosch University. I was elated and proud of myself for what I had achieved because it was not an easy road. I was the first one among my siblings to ever graduate with a postgraduate degree in the sciences, and I was the first member of my family in several generations to become a traditional healer. I had made myself, my family and my ancestors proud, and this was evidenced by the walls draped in numerous sacred relics, including a leopard pelt which is only worn by the most highly gifted healers in amaXhosa society. I felt achievement but also pain because the journey I had travelled to achieve success had taken its psychological toll on me. I was jobless and penniless, and although I held a valuable postgraduate degree, patients were not visiting my well-decorated indumba for consultation. I felt like a phony, as if there was something not quite right about me or my so-called 'abilities'. I thought to myself, "what is the point of having achieved all of these things if I have no patients, no job, no money or any prospect in any significant manner to show for it"? I found myself weeping in despair, begging the ancestors to show me a way forward in my life journey as a birthday present to commemorate my 'great year of making them proud'. On that night, I received a dream.

In the dream, I saw myself robbed in a red dress with black and white beads covering my face, neck, wrists and ankles. I walked towards a debilitated Xhosa-style hut on the top of a grassy hilltop. As I entered, I was met with the dusty remnants of what seemed like a family's abandoned life; a creaky bed, a grubby stove and broken pots laying scattered on the floor of the hut. On the cracked walls on the right-hand side of the hut, where traditionally the elders of the family would be seated, I saw an object peeking through the cracks. I approached investigating it to get a closer look at what it was exactly, and to my surprise it was a book. Dusty, torn and neglected, but still readable. I paged through the book to see what was written in it, but I could not quite make sense of the writing as it seemed to be written in a script that I could not understand. I took the book with me and exited the hut, on my way out I

saw a group of old women sitting outside of the hut, near the left-hand side of the doorway. They looked at me curiously, as I did them, and one of the much older women said to me, with a dreary and tired look in her eyes, "granddaughter, you must go back to school and study what is written in that book. It contains all the knowledge that you will need to heal patients when they come into your indumba for consultation. You should have received this information when you were a young child, but the water could not take you as we had wanted, so you must now earn it from land. This is our knowledge, and you must know it and let others know about it too. This is my deepest wish". I agreed to this strange request although I did not fully understand what it meant. I continued to walk down the hill and at the bottom of the hilltop was a river, which surprised me because it had not been there when I arrived to walk towards the hut. The only way for me to get across to the other side was for me to swim. I am not a good swimmer in the waking world and at times and often scared of venturing into deep waters, but for some reason I felt comfortable jumping into this river.

As I swam across, I noticed a bright, shiny reflection across the riverbed, and as I swam closer, I noticed that the riverbed was full of South African currency such as R1, R2 and R5 coins. There were also large banknotes such as R100 notes on the floor. Alongside the coins were fresh fruits and vegetables, laid out banquet-style. As I started to eat the delicious-looking fruits, I woke up from my dream.

I lay in my bed in awe of what I had just experienced. I quickly rolled out of bed and told my parents about the dream. My father, who was at this point the family patriarch, had been serving as my go-to person for all dream-related material since my graduation from traditional medical school. When I asked him what he thought the dream meant, he simply quipped "heh, maybe the ancestors want you to go back to school and study some more. You have been saying that you want to be a doctor, maybe this is what you must do". I was taken aback by my father's interpretation, since for months he had been pressuring me to get a job and to start bringing in an income, as if I was not trying to find work without difficulty.

I thought about my dream and my father's interpretation of it for the remaining weeks of 2019, and in 2021, I finally decided to enrol in a PhD program at Rhodes University, an institute of Higher Education in the town of Makhanda (formerly Grahamstown) in the Eastern Cape province of South Africa. I reached out to the head of the Anthropology department, who would eventually become my thesis supervisor. I informed her that I had an

interest in applying to their program. I joined the department in 2021 and began working on this thesis.

My interest in the subject matter was prompted by both the dream I shared above, as well as by my traumatic experiences that occurred within my kin-network and community, and by my role as an indigenous healer. My family, like many others in my community, have dealt with issues of dysfunction, broken family ties as well as domestic violence. Often, I felt rejected by my family as I was told that my gift is a nuisance. Whenever I would have a dream pertaining to a ritual the ancestors were requesting, my relatives would often yell at me, telling me that my dreams create problems. In my dreams, the ancestors would reveal that the rituals they were recommending were designed to heal the broken kinship relationships, which were a major source of trauma for the family.

However, my relatives were not interested in sharing space with one other. As a healer, this placed me in an extremely difficult position, as I was being instructed by the ancestors to reveal my dreams, but at the same time would get scolded by my family when I did. There was a time when I stopped sharing my dreams all together because I could not deal with the pain of being told I am a nuisance. My refusal to share the dream messages did not sit well with the ancestors, as the purpose of a dream message is to pass on the information to the kin group so that whatever issue needs to be addressed within the family can be dealt with effectively.

The rejection of my dreams by my family felt like a rejection of my existence and this caused me to hold much anger and bitterness. I recall having a conversation with the ancestors in my *indumba* where I told them that I can no longer continue to serve as a healer within my family. They must find other ways of healing the rift within the group. Following this conversation, I had a dream where the ancestors said they would visit the family themselves and give them a sign that my dreams need to be taken seriously as they carry valuable information. They said they would appear in the form of bees and would settle in the main family house within the homestead. When I woke up, I shared the dream with my family. Indeed, by the afternoon the swarm of bees arrived and settled in the kitchen near the window. In amaXhosa culture, a swarm of bees symbolizes ancestral presence and often the patriarch would have to welcome the visitors by conducting a ceremony that includes stepping into the family shrine to thank the ancestors for their visit. My father saw the bees and decided to kill them by using insecticide instead of welcoming them, although he was

aware of the dream I had and the message the ancestors had shared about their visit. This shattered my heart and prompted my leaving the homestead. My father's killing of the bees shocked me since in the indigenous African context, engagement with the ancestors is always mediated through material objects. According to Alubafi & Kaunda (2019) ancestral objects such as bees, "are an embodiment of the ancestors or ancestral meaning-making, which links the visible community to the world of the spirits" (Alubafi & Kaunda, 2021, p. 1). In the context of the bees, they represented a culturally recognised form of ancestral presence, hence my father's decision to kill them could be deemed as culturally insensitive, and even a violation. This is because in the Xhosa cultural context, ancestors are venerated through materializing their spirits into specific animals such as turtles (ufudo), rock hyrax (imbila) and bees (iinyosi) such that these animals are held at high esteem. When they visit a homestead, rituals are conducted in their honour to mark their arrival. Killing them could thus constitute a violation as deemed by the ancestors.

Following my father's killing of the bees, I strongly felt that my gifts and I were no longer welcomed. I relocated to Makhanda and rented out an apartment near the university. It was during my stay in Makhanda that I started documenting my dreams in a journal as I no longer felt safe sharing them with my family. This prompted my research to take on a more autoethnographic approach, as I strongly felt that my own experiences with trauma allowed me to better understand the scope of my study.

My traumatic exit from the family homestead negatively affected my mental health and slowed down the progress of my studies. During this PhD, I was hospitalized in a psychiatric hospital and treated for PTSD, depression and anxiety disorder. My psychiatrist diagnosed my family trauma as being a key contributing factor to my mental health problems. My personal experiences with family conflicts allowed me to design a methodology that would create a safe space for participants to share their own traumatic experiences that might have occurred in their own family spaces. The decision to focus on narrative was based on the understanding that trauma does not simply disappear, but rather can become visible in various forms such as the silence surrounding foundational family or cultural trauma. This suppression of narrative can present as in an inability to express emotions, or not been granted enough space to do so even if one wanted to. According to the US Department of Health and Human Services (HSS), this suppression of emotions can lead to profound effects on mental health, relationships, and even spirituality. This can be one of the mechanisms by

which that trauma is transmitted across generations (HSS, 2014). As evidenced by my descriptions of this process in the methodology chapter, the participants and I were able to share each other's stories, creating space for mutual healing to take place by prioritizing listening to each other's experiences. We were guided by amaXhosa customs throughout, further emphasizing the value of including indigenous cosmology and practice in the research process, which emphasises the sharing of stories as a way to meet difficulties.

It was my personal experiences with dreams that inspired me to study the anthropology of dreaming as a research method. I strongly felt that there were strong and very real messages in the dream life of Xhosa people, as evidenced by my own experiences. Throughout the duration of this study, I was constantly reminded, or even haunted, of my dream about the old woman who had asked me to please document her knowledge, and the sadness in her eyes as she watched her home withering away in time. This thesis has been a testament to the power of dreams in revealing hidden knowledge that would otherwise remain tethered in the debilitated walls of abandoned ancestral spaces. It is a fulfilment of my promise to my ancestors! It also may suggest that the process of research, where one is exploring something very personal and traumatic, may be seen as a healing strategy in itself.

1.2 Summary of the research

This study can be described as exploratory since it focused on exploring the understandings of historical and intergenerational trauma from the cultural perspectives of the isiXhosa-speaking people who participated in this study. The study further explored the use of the indigenous Xhosa understandings of health and wellbeing in managing the implications of what the participants understood to constitute trauma within their cultural contexts. According to Swedberg (2020), a study can be described as 'exploratory' if in its design it attempts to propose new ideas around a topic that has already been studied, or if it makes a cautious first analysis of a topic that has not been sufficiently studied. The impact of historical trauma on the indigenous people of South Africa has been extensively studied (see Asforth, 2005; Arrighi, Aschoff, & Scully, 2010; Beinart, 1979; Cindi, 2018; Halbach, 1988; Mostert, 1992), however, the cultural use of indigenous healing cosmologies in the management of historical and intergenerational trauma has not been studied in the Xhosa context. Thus, this study offers unique insights that have the potential to be studied further in future research.

In cases where a topic has not been sufficiently studied within a certain cultural context, exploratory research is conducted to have a better understanding of the research problem by utilizing an interpretative research approach that serves to identify issues that can be a focus for further research. This process involves allowing the research interlocutors to express their insights on the topic that is being studied as a means of generating new knowledge. Exploratory research attempts to uncover new approaches of studying a phenomenon by allowing, through its design, "the participants of the study to contribute to the development of new knowledge in that area", thereby creating the 'soul' of the research alongside the researcher (Hunter, McCallum, & Howes, 2019, p. 1). However, it is important to note that although the study participants shared their own understandings of what constitutes trauma, these understandings cannot be directly applied to the entire population of isiXhosa-speaking people who are in their millions. Therefore, this study does not aim to make sweeping statements about the entire Xhosa population of South Africa but explores the study participants' own interpretations and understandings of trauma as they have experienced it in their own lives.

1.3 Research context

Background

The aim of this study was to identify the cultural use of indigenous healing cosmologies, examples of which include but are not limited to ritual and engagement with cultural landscapes/nature, in healing historical and intergenerational trauma within indigenous Xhosa-speaking families and communities. Despite increased academic interest in indigenous knowledge systems (IKS) in the country, few studies have focused on investigating the indigenous understandings of trauma amongst African communities.

By "indigenous understandings" the study refers to the conceptual understandings of trauma within an indigenous interpretation, including issues of community knowledge, skills, attitudes, values and technologies that pervade cultural understandings of the aetiology of illness. All which integrate the physical, psycho-social, and spiritual dimensions and their imbalances in a holistic way. Following Mji (2013), I use the term 'indigenous', rather than 'native' or 'traditional', as is often found in the literature, because 'indigenous' more accurately represents the process of a knower's being and becoming a practitioner in their

field of practice. This results in the knower becoming a specialist in that field, within the context of the local environment in which he/she has been historically emplaced (Mji, 2013).

This process observed by Mji was especially relevant for this study as it intended to adopt a predominantly auto-ethnographic, reflexive and 'insider' anthropological approach to eliciting data. This approach was chosen as the optimum since I am an isiXhosa-speaking healer (*igqirha* and *itola*) and woman with amaXhosa, seSotho and Khoi ancestry, with deep ancestral connections to the region in which this study is located.

Study area

The geographical area under investigation in this study is the Peddie area (eNgqushwa in isiXhosa) of the Eastern Cape province of South Africa. The people of this area are generally referred to as amaXhosa and they speak the language of isiXhosa. They are part of the Nguni-speaking population of South Africa and are the second largest language group in South Africa (Bernard, 2010). As of 2019, there was roughly 9.4 million isiXhosa-speaking people in South Africa, 5.1 million of whom are in the Eastern Cape province (SAHO, 2019). However, as my own identity as a local to this region demonstrates, to speak isiXhosa is not to have an ethnically pristine point of origin as the region has been the site of multiple circulating and inter-woven peoples, including seSotho, Khoi, European and Asian settlers. However, while origins may be heterogenous, most of people in the Peddie area identify as amaXhosa.

Although they speak a common language, the amaXhosa are categorized into many distinct subgroups from various Xhosa-speaking chiefdoms and kingships. The amaXhosa of the Peddie area include the amaMfengu**,** amaGqunukhwebe**,** amaXesibe**,** amaMpondomise, amaMpondo, amaHlubi, amaGcaleka and the amaBomvana subgroups.

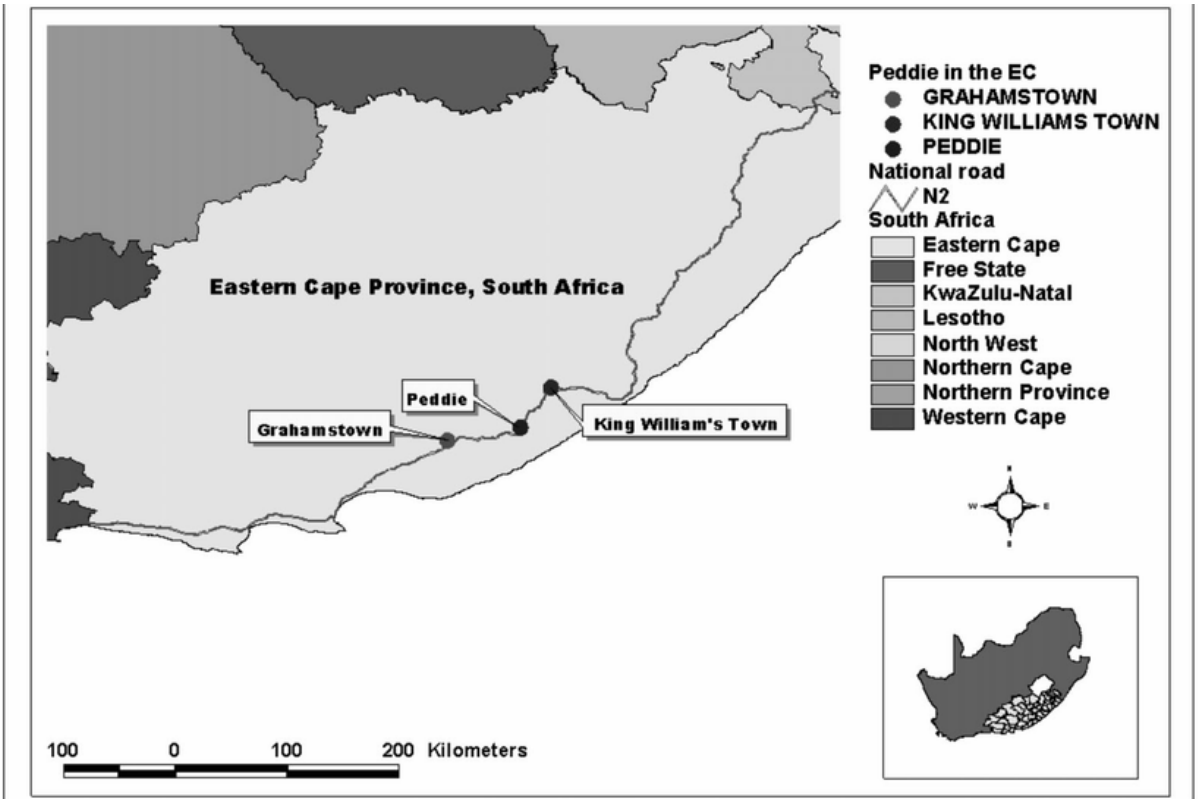

Figure 1: A map of the Eastern Cape province of South Africa, showing Peddie, Grahamstown (now Makhanda) and King William's Town (now Qonce). Source: World Map Atlas 1:50 000 Map Series (no date). Geography Department, Rhodes University in Thornton (2007, pg. 15).

Peddie was historically established as a military outpost during the sixth frontier war, and served to protect both British colonial interests and refuge to the amaMfengu who had sided with the British during the war. The amaMfengu were an emergent social grouping comprised of people's dispersed and dislocated by various wars in the 18th and 19th Century including the Mfecane and Difaquane. The amaMfengu were subsequently evicted from amaXhosa lands by the Gcaleka chiefdoms and settled in Peddie. A resettlement memorial in the form of a plaque embedded into a milkwood tree sits in the centre of the town and serves to commemorate the settlement of the amaMfengu into the area.

Figure 2: A photograph of the milkwood tree in Peddie that commemorates the amaMfengu. Source (Martinson, 2016)

Annually on May 14th, Mfengu descendants visit this site to honour their ancestors and to remember their contributions. The role of the amaMfengu in aiding British colonial expansion has historically created tensions between the amaMfengu and other isiXhosa-speaking groups in Peddie. However, tensions have simmered down over the generations. I come from this area and considering its past links with British colonial rule and the land wars, it is an appropriate study area for exploring the impact of historical trauma.

Today, Peddie is a bustling town made up of small villages scattered across the rural landscape. There are many villages in Peddie, including Tamarha, Cisira, Ncala, Mgwangqa, and Nqwenerhana. These are the sites where the research participants come from. In addition to a shopping centre, there is a local hospital named Kwanompumelelo (the place of success), that services the people of the area. The hospital is nestled outside of the town centre.

Defining trauma in an indigenous context

The term historical trauma (HT), also referred to as cumulative trauma or soul wound, originated from research into the experiences of Holocaust survivors and their families, but

has been recently developed by indigenous First Nation scholars in the USA, Canada and Australia investigating the effects of trauma imposed on indigenous peoples through colonization. It refers to the cumulative emotional and psychological harm experienced throughout the lives of an oppressed group of people and through subsequent generations (Marsh et al., 2015).

Some scholars argue that HT refers to a multifaceted and shared trauma experienced over time and across generations by a group of people, whereas intergenerational trauma (IGT) refers only to the specific experience of trauma across familial generations but does not necessarily imply a shared group trauma (Mohatt, et al., 2014). Although IGT is individually experienced, the trauma can span multiple generations, such that contemporary members of the affected group may experience trauma-related symptoms without having been present for the past traumatizing event. An example of this would be the case observed amongst black South Africans where the older generation who experienced the direct brunt of apartheid and the struggle for democracy seemingly pass on their generational traumas to their "born free" offspring. In essence, HT and IGT are interlinked, but cannot be defined as the same trauma.

In terms of the genealogy of 'trauma", Young (1995) states that trauma studies can be classified into two streams: somatic and psychological. The somatic stream has its roots in the 1860s with the identification of a type of assault classified as "nervous shock", which was as a legal term for psychiatric injury induced by a sudden, shocking event. Young identifies the psychological stream as having emerged in the 1790s with the discovery of "repression and dissociation" which is a type of forgetting that presents as an unconscious process of pushing traumatic memories out of conscious awareness and disconnection from the emotions that are connected to those memories (Young A. , 1995, p. 13). By the 1890s, nervous shock and repression/dissociation became conjoined to produce the concept of traumatic memory.

Throughout South Africa, indigenous people have been marginalised by oppressive structures of colonialism and apartheid, which in turn have undermined the psycho-spiritual ties to their land, ancestors, and natural environments that may hold sacred spaces of healing. Scholars agree that when indigenous people are denied access to their healing cosmologies then the psycho-spiritual health benefits that come with developing those relationships between people, their ancestors and the natural environment diminishes, resulting in health disparities (Mokgobi, 2014). Hence then, due to the historical and generational nature of the propagation

of trauma amongst the indigenous populations of South Africa, this study will focus on both HT and IGT. An effective way to achieve this would be to first identify what the indigenous understandings and definitions of HT/IGT trauma are amongst isiXhosa-speaking people. Secondarily, the study will need to document the scope of indigenous strategies/methods used in the management of such traumas.

Indigenous healing cosmologies and medicine

Healing cosmologies, which are embedded in a group's "worldviews" or ontology, are defined as all the theories of explanation used within a cultural context to make intellectual sense of life and the world. Hammond-Tooke (1989) argues that these explanations form the basis of the very ground of our human 'beingness', and as such have strong emotional content. Due to the emotional nature of these cosmologies, intellectual objectivity is often designated into the realm of subjectivity.

However, Hammond-Tooke acknowledges that the knowledge embedded in healing cosmologies is unique because it is both descriptive and theory-based and as a result serves to make a cognitive attempt of placing meaning to life and the living world (Hammond-Tooke, 1989). The indigenous amaXhosa world-view places Qamata (Creator) at the centre of religious and spiritual life, although much reverence is made to the ancestral spirits from which the kin is descended. The amaXhosa call the ancestors 'amadlozi', 'izihlwelwe' and 'izinyanya' interchangeably. The ancestors can either be forces of blessing or destruction, depending on the circumstances under which they are exerting their influence (Dold & Cocks, 2012).

According to the amaXhosa definition of health, illness is understood to be a result of broken relationships. To maintain good health, one must have a healthy relationship with the self, with his/her family, his/her community, ancestors and natural environment. When these relationships are broken, illness results (Mji, 2013). To redeem health, ritual offerings of livestock, foodstuffs and libations are offered to appease the ancestors and to ask for the mending of the broken relationships (May, 2019). To fully understand the use of indigenous knowledge systems (IKS) in healing historical trauma amongst the amaXhosa, an essential first step is to try to place the knowledge within a wider framework of concepts that reflects perceptions of humanity's place in the universe. There must be an acknowledgement that this knowledge forms part of a wider cognitive system which includes all cognitive ways of

conceptualizing and classifying the world. Including but not limited to kinship, religion, taxonomy, the nature and treatment of disease, geography, technical know-how and notions of good governance (Hammond-Tooke, 1989).

Turner (1969) argues that in any society that has many sacred attributes, the point of ritual is not merely about giving a general stamp of legitimacy to a society's structural positions. Rather it is a matter of giving recognition to an essential and generic human bond, without which there could be no society. Among the Xhosa-speaking people of South Africa, who themselves are a society that has many sacred attributes, ritual not only plays a crucial role in the conservation and propagation of indigenous health knowledge but also serves to strengthen the human bonds on which Xhosa society is built.

Variations of identity in Xhosa culture

In the 1950s Mayer (1961) identified two dramatically different sets of identity institutions among Xhosa-speaking people. There were the 'Red People', decorated in colourful beads, red ochre and traditional dresses, and the 'School People', who converted to Christianity, pursued formal education and lifestyles, and adorned themselves in Western clothing. However, there has been contestation to Mayer's Red-School binary, with some anthropologists arguing that the divisions between isiXhosa-speakers is not as clear as Mayer suggests.

Bank (2002; 2011) argues that old divisions between traditionalists and modernizers are not solely the result of British colonial influence, but rather a consequence of many other overlaying factors. Bank maintains that although Xhosa-speakers are no longer easily placed into the Red-School binary, the differences between believers and non-believers are nevertheless still inscribed in the collective social memory of many amaXhosa communities. This means that they can still be evoked and even reconstructed as communities grapple with the uncertainties of change (Bank, 2002). Mayer (1980) himself rescinded on his previous statements by arguing that the Red-School cultural orientations were not, in fact, essential cultural identities but evolving rural resistance ideologies.

Additionally, although various Xhosa groups live side by side and even share the same homesteads, other differences exist, despite them being united in common political structure and bonds of kinship. These differences lie in the fact that Xhosa-speaking people come from

various ethnic and clan lineages (Nzo, 1937). Historians argue that the concept of a 'Xhosa nation' did not exist prior to European invasion. Until then, the Xhosa-speaking people were differentiated into distinct groups, some of which had their own distinct linguistic and genetic backgrounds (Mtuze, 2003). For example, different clan groups will use specific plant species associated with their lineage to connect with their ancestors through dreams, and ritual protocols may differ between them.

Such an example is that of 'ubulawu' (e.g. Silene undulata), dream-inducing plants that are used to foster communication with the ancestors. It is protocol that during a ritual, the *ubulawu* must be prepared by the eldest male member in the family, which he does by mixing the plant into a can of water. He shakes the mixture with a forked stick made from the branch of an olive tree, until it produces a white froth (May, 2019). This froth can either be eaten or smeared on the body. In the case of a sacrificial ritual, the froth is smeared on the body of the animal to be sacrificed. Ritual failure may be attributed to nonadherence to these specific protocols. In exploration of IKS amongst the amaXhosa, it is prudent that researchers understand this complex identity paradox where conflicts over correct ritual protocols may arise.

In the Peddie area, where this research took place, isiXhosa-speakers who align with the 'Xhosa proper' group account for the majority of the population. These groups include the amaRharhabe, amaNgqika and the amaGcaleka. The Xhosa 'non-proper' population includes the amaMfengu and the amaGqunukhwebe. The Mfengu are a people whose ancestors were assimilated into amaXhosa society as refugees from the area previously known as Natal in the early nineteenth century. They are set apart from the amaXhosa proper by their remembered 'foreign' origin (Mayer, 1961).

The Gqunukhwebe are a group that was formed prior to the Frontier Wars of 1779-1879, specifically during the reign of King Tshiwo. The Gqunukhwebe are a mix of Xhosa and Khoi (particularly the Gonaqua Khoi). Nzo dates the formation of this group to year 1750 (Nzo, 1937). In modern times, this distinction rarely matters as a person only discovers whether one is amaXhosa proper or non-proper when he has heard what the clan name of his compatriot is.

However, it is possible that these differing lineage histories and previous conflicts between them may manifest in trauma and have consequences when correct ritual procedures and

protocol are required. Intermarriage between these groups is common as mutual loyalties easily outweigh distinct loyalties. Other isiXhosa-speaking groups such as the Mpondo, Mpondomise, Bhaca and Bomvana count as among the isiXhosa-speakers of this area. This thesis will refer to all the isiXhosa-speaking groups as isiXhosa-speaking people, while differentiating between sub-groups when needed in order to account for the acquired differences in culture and custom amongst this population.

Resilience and Post-Traumatic Growth

Scholars who study historical trauma argue that trauma models should be expanded and diversified to consider the historical and contemporary experiences of indigenous people (Gone & Kirmeyer, 2020; Mohatt, 2014; Fast & Collin-Vezina, 2010). Given the enormous challenges faced by many indigenous societies to survive, culturally resilient responses to trauma are prominent and take many forms.

Resilience as a concept is defined as the capacity of a system to undergo change while still maintaining the essential vestiges of structure, functions and feedback, and is therefore linked to cultural identity (Rotarangi & Stephenson, 2014). Resilience refers to a people's persistence to survive in the face of change, and their ability to adjust innovatively, using cultural resources, into more desirable conditions when required, without compromising their identity. The retention of cultural identity is the defining feature of a resilient society.

Although similar, resilience and post-traumatic growth (PTG) are not the same concepts. PTG is a theory that explains the kind of psychological transformation that happens to an individual following trauma. It refers to how people develop new understandings of themselves, the world they live in, how to relate to other people and a better understanding of how to live life after experiencing trauma (Collier, 2016). PTG is sometimes considered synonymous with resilience because becoming more resilient as a result of trauma can be an example of PTG. Hence then, PTG can be used as a measure of resilience. Scholars argue that resilience models that are found at the individual, family, and community levels should be explored in more detail in academia (Fast & Collin-Vezina, 2010).

1.4 Goals of the research

The primary aim of this study was to identify the indigenous understandings of historical trauma (HT) and intergenerational trauma (IGT) within the cultural framework of Xhosa-speaking people who participated in this study. The secondary aim was to identify how the participants utilize indigenous Xhosa healing cosmologies in the management of such traumas both within their Xhosa-speaking family units and at the community level.

The study objectives were as follows:

- What are the indigenous understandings of "trauma" amongst the indigenous Xhosa-speaking people who participated in this study?
- What strategies do these Xhosa-speaking participants use to manage trauma within their homes and communities?

1.5 Methods, Procedures, Techniques and Ethical Considerations

This was a descriptive, qualitative and ethnographic study. The study used methods which included participant observation, reflective narrative inquiry and auto-ethnography. Lyle (2009) states that employing narrative allows the researcher to draw from a cross-section of scholarly work including reflexive inquiry, critical analysis, and auto-ethnography (Lyle, 2009). Grumet (1981) expresses the usefulness of this approach in anthropological research by articulating the role that our stories play in illuminating how personal history shapes our attitudes, choices and values (Grumet, 1981).

As an indigenous Xhosa-speaking person who is also a traditional healer who manages and treats trauma, my experiences proved to be beneficial in my research. Hence the choice of using reflective narrative and auto-ethnography (Ellis & Bochner, 2000; Reed-Danahay, 1997) as methods of inquiry for this study. Bernard (2010) has also demonstrated the value of using radical participation (Jackson, 1989), reflexivity and auto-ethnography when studying the spiritual cosmologies and lived experiences of indigenous healers in southern Africa. This area of study by Bernard (2010) falls under what has been termed 'the anthropology of extraordinary experience' (Young & Goulet, 1994; Goulet & Miller, 2007)

Purposive sampling was with key informants and stakeholders identified in the Peddie area, such as trained indigenous healers, cultural custodians (religious faith healers), as well as my family members.

Data was collected through a variety of methods, including participant observation, semi structured interviews with key informants and informal discussions. The life stories, health expertise and health opinions of the identified participants was documented as part of the data collection process. All interviews and interview notes were conducted in isiXhosa and translated into English for the purpose of this study.

As some aspects of indigenous medicine may be secretive this was taken into consideration and respected. Such data was excluded in this thesis unless permission was granted. This was addressed by requesting informed consent from all participants before any data was collected. The anonymity of the participants was protected by using pseudonyms in this thesis. Due to my status as a community and family member in the study site, additional care was needed to navigate the specific relational ethics of working with those we are closely related to. In writing my own story, I was telling stories of others. Family members were consulted in the writing up process, permitting oversight on how their stories were presented, and whether or not these should be described in language which protected the informant from being identified or associated with the story directly. The ethical principles of the Declaration of Helsinki, the South African Guidelines for Good Clinical Practice and the Medical Research Council (MRC) Ethical Guidelines for Research were adhered to. Issues of intellectual property, respect for persons and justice pertaining to the knowledge collected from this study were handled according to the guidelines offered by MRC. Intellectual property was protected by adhering to the Ethics Code assembled by the !Xun, Khwe and !Khomani indigenous people of the South African San Council. Feedback from the main findings of the study was offered to all key participants on completion of the study.

As the researcher, I am a trained Xhosa-speaking indigenous healer known as an iTola and iGqirha. This profession diagnoses and manages trauma-related issues within the family unit and at the community level. To account for bias, reflexivity was a crucial part of the study. I utilized the concept of 'Anthropology at home', which is a term that anthropologists generally use to refer to studying one's own culture, usually by conducting fieldwork in one's own society (Jackson 1987; Munthali 2001; Peirano 1998; Mughal 2015). This technique was chosen because it requires high levels of reflexivity since the researcher's background and ways of perceiving reality, perceptions, experiences, ideological biases and interests all intersect during the research.

Balancing individual and collective rights to participate in the study

In terms of the inclusion of indigenous ethical frameworks in research, Hayward et al (2021) states that "Indigenous ethical protocols and standards indicate that collective consent may not replace the consent of individuals involved in the research project and that researchers must protect confidentiality, anonymity, and privacy of individual research participants as well as the larger community where necessary" (Hayward, Sjoblom, Sinclair, & Cidro, 2021, p. 408). Since indigenous participants experience illness within the context of the collective family unit, it is crucial in the consent process to allow the participants to consult with their families prior to engaging in research of this nature. This is done to balance individual versus collective rights to engage in community-based research. As a researcher, I made sure to allow [articiapnmts time to engage with their respective families so that they can together reach a consensus on what type of information would be shared. This way, I ensured that the research did not interrupt critical family bonds on which indigenous society in built.

1.6 Problem Statement

Historical trauma refers to the cumulative emotional and psychological harm experienced throughout the lives of an oppressed group of people and in subsequent generations (Marsh *et al.,* 2015). It refers to the accumulation of pain and suffering as a result of consistent oppression and violations of human rights. Many scholars argue that the impacts of trauma on indigenous people have resulted in health disparities that have been passed down through generations within the affected groups (Braveheart & DeBruyn, 1998) (Krieger, 2001) (Sotero, 2006).

The ability for trauma to be passed on from previous generations to subsequent generations forms the basis of historical trauma theory, with Sotero arguing that "historical trauma theory is based on the premise that populations historically subjected to long-term, mass trauma such as colonialism, slavery, war and genocide exhibit a higher prevalence of disease even several generations after the original trauma occurred" (Sotero, 2006, p. 93). Research conducted on the impacts of historical trauma on indigenous populations that have suffered from colonialism and oppression show that in communities that have been affected, subsequent generations "may continue to suffer, fundamental and irreversible damage as a result of traumatizing past experiences" (Maxwell, 2014, p. 2)**.**

The concept of historical trauma refers to a multifaceted and shared trauma experienced over time and across generations by a group of people, whereas intergenerational trauma (IGT)

refers only “to the specific experience of trauma across familial generations but does not necessarily imply a shared group trauma” (Mohatt, Thompson, Thai, & Tebes, 2014, p. 128). Connecting the past with the present is inherent in many cultural traditions and thus populations may have their own understandings of what constitutes trauma. According to Le (2024), the word “trauma” is not a modern invention. It can be traced back as far as the ancient Greek period, where it primarily referred to wounds on the human body.

In Freud’s *Beyond the Pleasure Principle* (1920) trauma “began to be used to describe the psychological state of a person’s consciousness when experiencing significant harm” (Le, 2024, p. 498). Bell (2006) argues that since the early days of psychology, scholars have failed to reach a consensus on the definition of trauma, with the field of psychoanalysis defining trauma as a mental wound similar to a physical wound, while in sociology, trauma is regarded as a phenomenon of cultural development which include theories about the origins of pain.

Due to the complex and diverse causes of trauma, settling on a singular universal definition is challenging. LaCapra (2014) categorizes trauma into two types: historical trauma, which is a cumulative emotional and psychological wounding that emanates from historical events such as colonialism, displacement, discrimination and genocide, and structural trauma, which refers to the emotional and psychological damage from inequity enforced through public policies and institutional practices which are built into the structure of the culture and which reinforce social inequity, examples of which include discrimination in economic opportunity, employment, education, housing and healthcare.

In this study, I consider the conceptualizations of historical trauma as suggested by Sotero (2006), Mohatt et al (2014) and LaCapra (2014) but take on more of an autoethnographic account of my own ‘wounded healer’ experiences within the context of my own broader family’s trauma that has manifested over time. The concept of the wounded healer was first coined by Carl Jung (1961) and refers to the idea that a healer does their best work when they are consciously aware of their own personal wounds. The healer’s wounds may be activated in certain situations especially if those wounds are similar to the patient’s own, thereby allowing the healer to heal from a place of compassion.

This approach to conceptualising trauma demonstrates how my own calling to be an *igqirha* gave me unique insights into how ancestral knowledge can assist in the healing of historical

and intergenerational trauma. In addition to my personal experiences with trauma, I explore the experiences of community members who themselves have utilized amaXhosa cosmologies to try to reconcile their pain and to mend broken relationships stemming from the trauma they experienced.

1.7 Overview of amaXhosa indigenous healing cosmologies

In her study of the cultural understandings of health and illness amongst the amaBomvana Xhosa-speaking group of the Madwaleni area of the Eastern Cape, Mji et al (2019) states that

> "For the older Xhosa women, the ultimate cause of sickness is a broken relationship. They propose that when relationships are not working (whether with family, neighbours or the village), sickness starts knocking at the door. According to them, it starts with one person who is feeling anxious because his or her relationship is not working with whoever. This anxiety that has attacked that one person because his or her relationships are not working starts affecting the person and, as a result of this, the person carries *umoya ombi* [bad, toxic air/spirit]. This bad toxic air caused by anxiety because of relationships that are not working at a personal level can make one sick, and the area that can.ai first become sick is the weakest area of the body, as the older Xhosa women believe that we all have weak areas in our bodies. At a relational level, this person carrying bad toxic air can affect those close to him or her, resulting in them also being affected, and this could spread to the neighbours and at the village level" (Mji et al, 2019).

According to the older amaXhosa women in Mji's study, conflicts are started by one person with an anxious spirit. To remedy the situation would involve reconciling the relationships that have been broken. isiXhosa-speaking people hold the idea that at the core of sickness are broken relationships. To bring good health, ritual must be performed to communicate with ancestors for their guidance on how to mend the broken relationships. Mji (2019) shows that within the amaBomvana Xhosa-speaking people, an individual must have stable relationships to be considered healthy. These relationships include the relationship with the self, the family unit, the ancestors of the clan, the community and the natural environment. When any of these relationships are out of balance, illness results.

Among isiXhosa-speaking people, relationships between people act as a determinant of health. To redeem health, ritual offerings of livestock, foodstuffs and libations are offered to appease the ancestors and to ask for the mending of the broken relationships (May, 2019). To fully understand the use of indigenous knowledge in healing historical trauma amongst the isiXhosa-speaking people of South Africa, an essential first step is to try to place the knowledge within a wider framework of concepts that reflects perceptions of humanity. This knowledge forms part of a wider cognitive system which includes the conceptualizing and classifying of the world, including but not limited to kinship, religion, taxonomy, the nature and treatment of disease, geography, technical know-how and notions of good governance (Hammond-Tooke, 1989).

Indigenous amaXhosa understandings of health and wellbeing

From a broader point of view, Jacob Olopona states that sickness in the indigenous African worldview is both an imbalance of the body and of one's social life which are a result of strained relationships between the individual and their family/kin or their ancestors (Chiorazzi, 2015). The amaBomvana people of South Africa, who are a Xhosa-speaking group, also assert that illness is the result of an imbalance in one's social life caused by broken relationships, including relationships with ancestors (Mji, 2019).

This notion is discussed by Mbiti (1969). He states that African people consider the physical body and the spirit as entities that coexist with each other and therefore cannot be separated**.** This connectedness stretches beyond the individual and includes the family and community one comes from. As Mbiti explains, illness is experienced in both its cultural and spiritual understandings, meaning that community knowledge is often utilized to bring the person back to good health. This is the broad African concept of kinship**.**

The isiXhosa-speaking people of South Africa refer to health as "impilo" and the state of being healthy as "ukuphila**"** (May, 2019). Xhosa cosmology explains *impilo* as a as a state of balance of relationships both internally and externally. That is, for someone to have *impilo*, he/she must have a balanced relationship with his/herself, his/her family, his/her community, his/her ancestors and his/her environment (Mji, 2019).

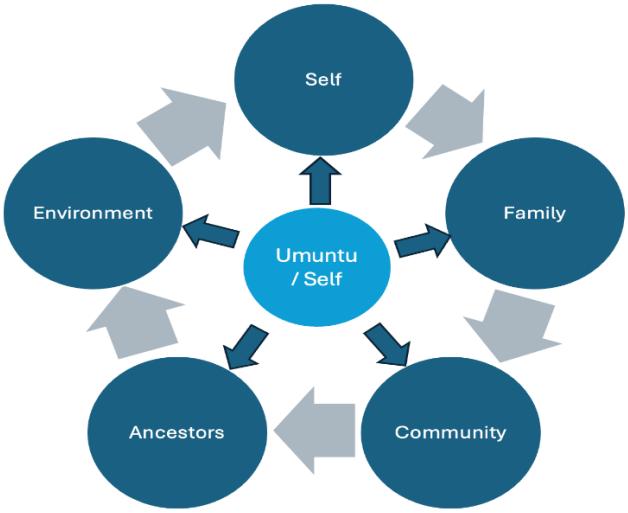

Figure 3: The Xhosa indigenous health model that defines health as a state of stable relationships between the self, family, community, ancestors and the environment.

In times of illness, the ancestors are consulted, with the help of traditional healers/diviners, to advise on the appropriate methods that must be used to heal the sick person/people. This is because indigenous Xhosa cosmology places much reverence to the ancestral spirits from which the kin is descended. The ancestors can either be forces of blessing or destruction, depending on the circumstances under which they are exerting their influence (Dold & Cocks, 2012). To redeem health, ritual offerings of livestock, foodstuffs and libations are offered to appease the ancestors and to ask for the mending of the broken relationships (May, 2019).

Relationships between people and nature as a determinant of health

Xhosa-speaking people regard the natural environment to be intrinsically linked to the human health and wellbeing. In the isiXhosa language, nature is referred to as *indalo* and is understood to the workings of the Creator God known as *Qamata*. Soga (1931) explains that

the Xhosa cosmology places the creation of human beings in the same basket as the creation of the natural environment in what was known as *uhlanga*. From the basket of creation, cattle emerged first, followed by human beings, and then the rest of the creatures of the environment. This order of origin alludes to the enormous value placed on cattle as a key node around which amaXhosa, and other isiXhosa-speaking people, organise society and sustain social reproduction. The importance of cattle both symbolically and materially cannot be overemphasized.

The spiritual connection to nature is reflected in the indigenous amaXhosa health model that posits that part of maintaining good health requires maintaining a state of healthy relationships between people and nature. The natural environment also provides Xhosa-speaking people with the medicines that they utilize to manage illness. A study by May (2019) found that isiXhosa-speaking people have strong understandings of ethnobotany and hence consider the natural environment to be an essential part of what makes a person a human being.

The natural environment is also utilized in rituals and ceremonies as ancestral spirits are known to reside in rivers, caves, forests, mountains and oceans. To communicate with the ancestors, visitations are made to these sacred sites where prayers and offerings are made to redeem health. Sacred spaces are also visited in times of hardship and distress because communing with nature "can ease feelings of hardship, stress and loneliness - a reality common for many who are dealing with unemployment, insufficient income, violence, and poor living conditions" (Cocks, Alexander, Mogano, & Vetter, 2016, p. 829). Therefore, the deep connections which isiXhosa-speaking people have with nature foster resilience and as such can serve as vehicles for healing and reconciliation.

The use of dreams in managing wellbeing in the amaXhosa context

According to Bird (2005), dreams in the indigenous South African context are significant because they can provide insight into the subconscious mind, which contains thoughts, emotions, and desires that are not easily accessible when awake. Analysing dream symbolism and themes can help trauma patients to understand their emotions, thoughts, and desires, and can be a tool for personal growth and self-reflection (Ermshar & Associates, 2023). This process is particularly important in the Xhosa context because in indigenous Xhosa cosmology, dreams are considered a sacred realm where the living can connect with

ancestors, spirits, and the divine, and hence they are packed with meaning and symbolism that has implications for healing.

Xhosa-speaking people acknowledge that dreams offer messages, warnings, and guidance, and hence dream interpretation is a revered practice with trained diviners playing a crucial role in deciphering dream symbolism. Some of the dream symbolism observed amongst Xhosa-speaking people is deeply embedded in the environment and cultural landscapes that are significant sites of ancestral power and manifestation for amaXhosa kin groups. These include animals, seeds, objects with cultural value such as tobacco, traditional beer, beads, and natural environmental features such as rivers, waterfalls, mountains, forests and the ocean.

The cultural and spiritual foundations of dreams in Xhosa spirituality highlights the profound significance of dreams as a means of communication with ancestors, deities, and the spiritual realm, making them possible vehicles for generating innovative ways to manage wellbeing. In Xhosa cosmology, dreams are not merely fleeting images of the night but sacred encounters that bridge the earthly and spiritual worlds, enriching the spiritual tapestry of Xhosa society. This makes dreams a valuable source of information that can be used to manage illness. However, there has not been much emphasis or detail provided on the roles of dreams and dream-related rituals on indigenous management of historical trauma, or how they may be embedded within culturally significant landscapes.

1.8 Conclusion

This exploratory study focuses on exploring the understandings of historical and intergenerational trauma from the cultural perspectives of isiXhosa-speaking peoples. I explore the use of the indigenous amaXhosa understandings of health and wellbeing in managing the implications of what is understood to constitute trauma within this cultural context. As a contribution to understanding the impact of historical trauma on the indigenous people of South Africa, this study expands on existing work by emphasising the use of indigenous healing cosmologies in the management of historical and intergenerational trauma. The thesis explores this in the chapters presented as follows:

This chapter has introduced the study background and context by detailing the problem statement as it relates to trauma studies in the cultural context of isiXhosa-speaking people. It has introduced the cosmological framework that underpins the healing practices explored in

the thesis, emphasising the role of dreams as points of coming to know and coming to act, as well as the study context of Peddie and the Eastern Cape.

Chapter 2 offers an overview of the intersections of indigenous healing cosmologies with historical events that have occurred in the wider Eastern Cape and South African context. This provides a preliminary understanding of some of the key events that have occurred in this region and radically restructured relationships to land, kinship groupings, religious practices, and moral frameworks. I consider how these historical traumas may have impacted wellbeing over generations.

Chapter 3 details the conceptual and theoretical understandings that underpin this study. The trauma that has occurred in the South African context is placed within the context of historical trauma theory, resilience theory and the anthropology of memory. The limitations of historical trauma theory are also discussed.

Chapter 4 serves to showcase how the knowledge that is embedded in indigenous healing cosmologies has been used in the management of historical and intergenerational trauma in the context of countries whose indigenous populations have endured mass trauma similar to that of South Africa. The purpose of this chapter is to assess how healing cosmologies can be applied to manage trauma-related issues in these contexts, and the value of the inclusion of indigenous knowledge systems in informing trauma care and practice

Chapter 5 outlines the methodological approach of the thesis and highlights the study design as well as the methods used in this study such as the anthropology of dreaming in the use of dreams as data. The chapter also highlights the ethical considerations that were taken during the study, particularly in relation to the ethics of sharing traumatic experiences as well as intimate others and the sharing of family stories as data.

Chapter 6 presents auto ethnographic and community stories that illustrate the importance of dreams as devices to diagnose and identify strategies for addressing historical trauma that has resulted in family rupture and inter-personal conflict. The action that follows dreams, including recovery of lost ritual knowledge, is shown to be essential for the resolution of these contemporary maladies through ceremonial response. Stories explored include tensions that have arisen through historical conflicts between socio-cultural subgroups, as well as the impact of the migrant labour system, apartheid land policies on family structures and kinship

relationships. I consider auto ethnographic reflections on efforts to reconcile my own amaXhosa, seSotho and Khoi ancestry. Additionally, I consider the cultural force of emotions such as jealousy, envy and anxiety in a context of upheaval, and their manifestation in accusations of witchcraft that further upend the stability and wellbeing of kinship groups and communities. The chapter explores how dreams, and the ritual practice that arises from them, offers avenues for resolving these tensions.

Chapter 7 presents stories that explore the role of water divinities in ritual, ceremonial and dreaming processes that contribute to the management of trauma within kinship groups, and in wider community concerns. This includes a consideration of how water divinities participate in the mitigation of trauma emanating from family violence, historical land dispossession, and the articulation of spiritual arguments against resource extraction that impacts environmental spaces such as the ocean, which play significant roles in community healing and in the cosmological frameworks that underpin them. Concepts of community healing are explored within the cultural conceptualizations of morality, including issues of community resources, shared knowledge and general wellbeing.

Chapter 8 concludes the thesis, highlighting the critical research outcomes of the study.

CHAPTER 2: The historical trauma experienced by Xhosa-speaking people

2.1 Introduction

This chapter serves to introduce the historical events that have shaped the Eastern Cape province of South Africa and arguably created the conditions for the intergenerational trauma which continues to affect communities in the present day. This chapter details the history of the area now known as the Eastern Cape province of South Africa, offering the reader an understanding of some of the key traumatic events that have occurred in this region, and how that historical trauma may have impacted wellbeing over generations.

2.2 Xhosa healing cosmologies in the management of historical and intergenerational trauma

As a community member of the study area, I have seen firsthand the effects of historical and intergenerational trauma on the lives of some community members. The impact of some of the historical events that have been detailed in this chapter have not been resolved in modern day South Africa, with most of the rural indigenous population living in dire poverty with lack of access to adequate education and resources for improving quality of life. Peddie, like many rural areas in South Africa, struggles with high rates of poverty, unemployment and violence (Thornton, 2009). These struggles are rooted in the historical trauma of land dispossession, apartheid and systemic oppression.

The historical trauma of land dispossession still plagues the people of the area as is often evidenced by the emergence of new rituals such as *ukulanda amaxhego* that serve to remedy the trauma of families being forcefully relocated from their lands (de Wet & Mgujulwa, 2020). Since Xhosa-speaking people have a deep connection to their ancestral spirits, these forceful removals have had a lasting effect on the wellbeing of descendants as they separated people from the graves of their ancestors. Such rituals aim to address this by reconnecting the descendants with their ancestral spirits so that these sacred bonds which are important for health and wellbeing can be restored for future generations.

However, many families in the study area have been greatly affected by the historical trauma of migrant labour that was imposed during the apartheid era. The breakdown in family structure that resulted from this policy still plagues many families and this is observed in the

breakdown of kinship bonds that are important for the conducting of rituals. Despite the challenges posed by strained kinship bonds, the people of Peddie continue to forge ties with their natural environment as means of maintaining the critical relationships that play a pivotal role in maintaining wellbeing.

These ties to the environment are further strengthened using dreams and communication with ancestral spirits as many rituals require visits to sacred sites that are in the natural environment for the ritual to succeed. Dreams play an important role in the maintenance of wellbeing as messages are received from the ancestors through dreams, which are then interpreted for meaning by trained diviners who are qualified to assist the families in aiding reconciliation in cases where bonds have been broken and need to be fixed.

However, the validity of dreams as a source of information as well as the spiritual tools used by these healers has been negatively affected by the introduction of Christianity. Many families struggle with the integration of Christian beliefs into the indigenous family space as this can at times create conflict between family members, especially between those that have converted to Christianity and those that still practice indigenous spirituality. Xhosa tradition advises that when families are plagued by conflict, help ought to be sought out from the community's traditional leadership so that the family can reach a resolution and end the conflict.

However, in many communities where these issues are rampant, the historical breakdown of trust between the people and their traditional leadership makes such resolutions challenging. This thesis aims to bring new insights into this field through an autoethnographic and reflexive methodological and analytical approach to the subject (that I expand upon in later chapters) which are key aspects of this thesis. As both a Xhosa healer and someone who has had firsthand experience of these traumatizing historical events, I have unique insights to offer on the subject matter. The anthropology of dreaming as a methodology for studying trauma features strongly in this thesis and will be analysed in more details in subsequent chapters.

Culturally informed manifestations of trauma

Human beings from various backgrounds experience pain, and when they do, they have a need to make sense of their experiences (Theisen-Womersley, 2021). Droždek & Wilson (2007) claim this to be particularly true of traumatic experiences as people often try to understand their pain and suffering by placing it within the context of their indigenous health models. Literature suggests that populations who have experienced severe trauma exhibit cultural variation in trauma responses, and according to Weissbecker, Hanna, El Shazly, Gao, & Ventevogel (2018), these variations are seen in how experiences of trauma are understood and explained.

Additionally, these variations in understanding are seen in the ways in which people apply beliefs about the illness and the approaches that are taken to address the trauma**.** According to Theisen-Womersley (2021), medical anthropologist and cross-cultural psychiatrist Arthur Kleinman was among the first to describe cross-cultural differences in narratives of traumatic experiences and the ways in which culture shapes expressions of distress and health-seeking behaviour. In his analysis, Kleinman (1980) defines cultural healing as involving both the personal and social understandings of the illness, as these two factors affect the patient's experience of the illness and consequently shapes the cultural context of the healthcare strategies the patient will seek.

According to Theisen-Womersley (2021), to enter into the discussion about culturally informed manifestations of trauma, the word 'culture' itself needs to be re-examined as it is not immutable but instead changes over time. Additionally, Drozdek & Wilson (2007) assert that "culture regulates the impact and expression of emotions and shapes individual expressions and perceptions of how to suffer under stress and these modes are taught sometimes openly, sometimes indirectly" (Droždek & Wilson, 2007, p. 3)**.** Therefore, culture is not static or set in stone but is constantly being modified and improved by the members of the culture. Since human development is embedded in social networks, culture "plays an important role in shaping our identity, and constructs our reality via a process of cultural representations within a specific historical and cultural context" (Sharapova & Goguikian-Ratcliff, 2018, p. 2). From these arguments one can stipulate that culture plays a key role in how people understand their reality and the pain they experience.

2.3 The genealogy of the Xhosa-speaking people of South Africa

Genealogically, the amaXhosa trace their genealogy to the reign of King Tshawe (1600-75), although the story of Xhosa people stretches far beyond the birth of Tshawe (Mostert, 1992). Around the period of Tshawe's reign, four generations of minor chiefdoms of Mndange and Ntinde emerged within the Xhosa kingdom. These included the Bhotomane and Tola under the Mndange paramount chieftaincy, and the Dyani and Tshatshu under the Ntinde paramount chieftaincy (Mostert, 1992). King Tshiwo took reign after the death of Tshawe and ruled until 1715. He was then succeeded by King Phalo (1715-75).

The Xhosa kingdom broke into other minor chiefdoms again after the reign of Phalo, led by his three sons; Gcaleka who established the amaGcaleka chiefdom, Rharhabe who established the amaRharhabe chiefdom and Langa who established the amaMbalu chiefdom. From the paramount succession of Gcaleka (died 1778) emerged the reign of Khawuta (1778-94), who was succeeded by Hintsa (1778-1835). Meanwhile, the sovereign succession of Rharhabe was taken by Mlawu (died 1782) who ruled alongside his brother Ndlambe (died 1828) in the amaRharhabe chiefdom. Mlawu was succeeded by his son Ngqika (1778-1829) while Ndlambe was succeeded by his sons Mdushane (died 1829) and Mhala (died 1875) (Booyens, 2014). Since Xhosa culture is patrilineal, historical accounts make mention of the men who ascended to power and not much is written about the women who birthed these blood lines.

It is important to keep in mind that the indigenous people of South Africa had their own ways of tracing their genealogy, which might not look similar to conventional ways of the western world. In fact, Mellet (2020) reminds us that the indigenous people of South Africa were a people who had their own ways of identifying themselves that may have differed from those of the European settlers they encountered.

Additionally, Elphick (1995) explains that amongst the indigenous people of South Africa there was a strong state of flux in that groups would intermarry and interact with one other rather than remaining homogenous, thus identities were constantly in flux and not static**.** Keeping that in mind, it is important that when discussing the history of the Xhosa-speaking people, scholars must acknowledge that indigenous identities have not remained stagnant throughout time but have shifted as people moved in and out of lands and encountered one other.

2.4 What is an "indigenous" identity in South Africa?

The World Health Organization (WHO) identifies 'indigenous people' as people who identify themselves and are recognized/accepted by their community as indigenous, demonstrate historical continuity with pre-colonial and/or pre-settler societies, have strong links to territories and surrounding natural resources, have distinct social, economic or political systems, resolve to maintain and reproduce their ancestral environments and systems as distinctive peoples and communities.

This definition also includes people who are described using other terms such as 'tribes', 'first peoples', 'aboriginals', or 'ethnic group' as the use of these terms varies from country to country (WHO, 2007). In South Africa, the term 'indigenous' sometimes has confusing connotations as its use is not consistent. At times, the term is used to refer to the black population, while at other times it is used to refer to the undisputed autochthons of the territory, the Khoisan peoples. However, according to the South African House of Traditional Leaders, the term 'indigenous people' in South Africa refers to both the black population and the Khoisan population (SA-Gov, 2024).

In South Africa, the racial category of "black" mainly refers to the Bantu-speaking people which include the Xhosa, Zulu, Ndebele, Swazi, Sotho, Tswana, Tsonga, Venda and Pedi peoples. The term 'Bantu' has both positive and negative meanings, depending on the historical context in which it is used (Van der Waal, 2011). When used in a contemporary racial context, the term is considered offensive because of its strong association with the apartheid system. Although in Anthropology, the term was used to refer to the people that spoke a vast number of interconnected languages (Van der Waal, 2011).

Bantu-speaking people are not a homogenous group, rather they comprise more than a 100 million people ranging from West Africa to southern Africa, and who speak about 700 languages, including many dialects (Van der Waal, 2011; Van Warmelo, 1935). All these languages do however share certain basic core elements such as those based on the stem '-ntu', meaning 'person' (Thornton, 2017).

According to van Wyk (2016), the term 'Khoisan' refers to the Khoi (previously known by the derogatory term 'Hottentots') and the San (previously known by the derogatory term 'Bushmen'). The term denotes the "cultural, linguistic and even traditional patterns amongst

the people" (van Wyk, 2016, p. 34). The Khoi (also known as Khoekhoe) people were cattle and sheep herding pastoralists whilst the San were hunter-gatherers. The stark differences in their way of life and languages distinguishes the two groups from each other, although they have "some common ancestry and cultural commonalities" (ibid).

The Khoisan are often referred to as the 'first-nations people' of South Africa, with Boezak (2017) claiming that they were the first to bear the brunt of colonial expansion in South Africa. Mellet (2020) contests the term 'Khoisan' or 'first nations' because it denotes homogeneity within this group which is not the case. He argues that the Khoi and the San were different groups that were incorrectly grouped together by colonial authorities, but the two groups differed in both culture and language.

In this study, the term 'indigenous' as it relates to the South African context will be used to refer to the ethnic groups of South Africa which are categorized as either 'Bantu' or 'Khoi' or 'San', especially those that embrace the ontologies and epistemologies still embedded in 'traditional' systems of belief and knowledge. 'Traditional' used here does not imply a static system of knowledge but one that is derived from past generations of accumulated knowledge that has adapted in a dynamic way to changing contexts through time.

2.5 Assimilation between Xhosa and Khoi in the Eastern Cape

The historical relationship between the indigenous groups of the Eastern Cape is relevant to this study as it has greatly shaped how identity is conceptualized among the people of this area. In the area of Peddie for example, it is common to find Xhosa-speaking people who come from multiple indigenous backgrounds, including those of Khoi origin. For the people of this area, indigenous identity is therefore not straight forward but has been influenced by various factors. Ross (1980) argues that historically the Xhosa-speaking people and the Khoi peoples of the Eastern Cape lived in proximity with each other and that at the turn of the eighteenth century saw the assimilation of many Khoi groups into Xhosa society because of land dispossession, and the disruption of social and economic independence that resulted from colonial expansion.

In particular, he mentions the larger Khoi groups that assimilated to be the "Gonaqua, the Gqunukhwebe and the Ntinde" although he also makes mention of other smaller Khoi groups such as the Inqua and Hessequa (Ross, 1980, p. 206-261). He mentions that this assimilation

was further fuelled by similarities between the groups, such as the sowing of sorghum for traditional beer making and the erection of huts as dwellings, although the Khoi "were nomadic and certainly lived in huts that were far from the well-built, more or less permanent, structures of the Xhosa" (Ross, 1980, p. 261).

In his attempt to account for the stark differences in Xhosa and Khoi society, Ross asserts that the low density in population among the Khoi (they were mostly hunter gatherers who adopted 'pastoralism' as they lost land and access to herds of wild animals that they hunted for food – this discussion could be more nuanced) could be attributed to the fact that they were pastoralists who primarily depended on their herds and hunting for food with very minimal food crops being planted, whereas the Xhosa were highly skilled agri-pastoralists who planted millet, sorghum, beans, melons and maize and prioritized cattle herding, the latter being integral to their cultural framework and exchange systems.

Ross further argues that there were known conflicts between the Khoi groups and the Xhosa, mainly around issues of grazing land and cattle theft. The larger and more militaristic Xhosa often exerted their power onto the smaller, less militaristic Khoi groups, resulting in tense relations, which the British eventually took advantage of during colonial expansion in the frontier. He explains that in the Eastern Cape, the line between who was Gonaqua and who was Xhosa was not so neatly defined as there was much intermarriage between the groups. Historian Alfred Nzo identifies the emergence of the ama Gqunukhwebe as a result of this hybridization and as such the group was of both Khoi and Xhosa heritage (Nzo, 1937).

Ross states that although the amaGqunukhwebe represented the assimilation of Khoi groups into Xhosa society by being awarded their own chiefdom, they had a "status as a recognized, albeit inferior, Xhosa tribe during the eighteenth century" (Ross, 1980, p. 262). The decline in Khoi independence eventually resulted in their full assimilation into Xhosa society and culture. Today, the Gqunukhwebe make up a large portion of the Xhosa-speaking population of Peddie and identify more with Xhosa culture than they do with Khoi culture, although acknowledgement of Khoi origins is given, especially during rituals.

Ross makes a strong argument about how assimilation was eventually inevitable between the two groups by stating that "the fact of assimilation over a long period shows that there is no genetic distinctiveness between the two groups that has any meaning for historical analysis. Rather being a Khoi - or a Xhosa - entailed following a particular mode of existence. In part

this consisted of adopting a distinct value system but, even more importantly, it concerned an interrelated complex of economic activities and juro-political arrangement…In theory individuals were free to choose which of the two or more modes of existence they would follow" (Ross, 1980, p. 264). This argument makes sense considering that one of the most well-known Gqunukhwebe figures was Makhanda ka Nxele, who recognised both his Xhosa and Khoi origins.

Makhanda would eventually become one of the prominent indigenous figures in the resistance against colonialism, particularly in the battle of Grahamstown where he led indigenous warriors into battle against the colonial forces in 1819 in what was to be described as a heroic act of defiance against colonial rule (Shaw, 2021). This assimilation, and the conflicts it presents, is of importance to the autoethnographic data I share in Chapter 6 from my own family, as I am descended from the Gqunukhwebe on my paternal grandmother's side of the family.

2.6 The traumatic history of the Eastern Cape province

The Eastern Cape has endured a long history of invasions from outsiders who sought to claim the land as the Great Trek of the Boers from the Cape Colony to the British Empire during the Frontier Wars. However, there has been a long-standing myth that Bantu-speaking people invaded the lands of South Africa, migrating from West Africa centuries prior to the arrival of Europeans. This has been debunked, and Mellet (2020) cautions against the so called the 'empty land' myth and claims of a 'Bantu invasion' that alludes to a forced Bantu encroachment into native Khoi land.

To provide a clearer context**,** the "Bantu Migration" myth states that millennia ago, Bantu-speaking Africans from West Central Africa moved southwards into present-day South Africa and then settled alongside the Khoi and the San in southern Africa (Van der Waal, 2011). Xhosa-speaking people, along with the Zulu, Ndebele and siSwati speakers form the modern-day Nguni population of southern Africa. This retelling of history in this manner has been greatly critiqued by Mellet (2020) because the indigenous peoples of the Eastern Cape did not adhere to neat definitions but were in constant flux with one other and notions of identity shifted along with the people. Many historical accounts state that European settlers first arrived in South Africa in 1652 under the command of Jan van Riebeeck who was sent by the Dutch East India Company (VOC) in order to establish a supply station for Dutch

trading fleets in the Cape (Hamann & Tunder, 2012). van Riebeeck facilitated the shipment of slave labour from the Indonesian archipelago into the Cape until the British took control of the region. VOC workers, mainly of Dutch origin expanded the European settler community in the Cape and eventually ventured into other parts of South Africa.

These farmers came to be known as 'Boers' and later as 'Afrikaners' (ibid). The British brought in English settlers in the early 1800s, as the settlers moved eastwards into the country, they ran into trouble with the native Khoi and Xhosa-speaking groups. These tensions led to the land wars of the nineteenth century as the British militarized their land grabs in what was then called the Eastern Frontier (Mostert, 1992). The land wars brought much destruction to Xhosa people as well as the Khoi groups in the Frontier. The final blow to the indigenous resistance to colonialism in the Eastern Frontier came after the cattle-killing movement of 1856 (Hamann & Tunder, 2012). An overview of the historical events that led to mass historical trauma amongst the indigenous people of the Eastern Cape is given below.

The Xhosa Wars/Frontier Wars

The Xhosa Wars, also known as the Cape Frontier Wars, were a series of nine wars from 1779 to 1879 between the Xhosa and the British Empire. These events were the longest-running military resistance against European colonialism in Africa. The first to third wars (1779-1803) saw a clash between the Xhosa and Boer as the latter encroached on indigenous lands in their quest to settle in the area. The dawn of the fourth war (1811-1812) saw the entry of British troops into the area in what was an attempt to clear land for white British settlers. Of course, this did not come without conflict and revolts against British occupation ensued, resulting in the attack on Grahamstown led by Makhanda ka Nxele on 22 April 1819 (Robson & Oranje, 2012).

Makhanda's failure to seize Grahamstown saw a shift in alliances take place between Xhosa chiefs and the colonizers between the fifth and sixth wars (1818-1836), eventually resulting in a land distribution treaty being signed in 1834. However, raids and skirmishes continued after the War of the Axe began in March 1846 and well into the eight war (1850-1853), which saw Xhosa regiments fighting back with firearms for the first time (Mostert, 1992). By the end of the eight war in 1853, the land was annexed by the British, setting the stage for settlement by white Europeans into the area. By the time the ninth war started (1877-1879), the shifting alliances between some Xhosa chiefs and the British had reached boiling point as

the ninth war is documented to have been started by a feud between the pro-British Mfengu and the anti-British Gcaleka (Robson & Oranje, 2012). This eventually led to the disarming of the Gcaleka and the annexation of their lands into British control where white settlers were eventually moved in.

The killing and beheading of King Hintsa (1835)

The frontier wars were extremely devastating for Xhosa people and caused immense trauma. One of those highly traumatic incidents that have had long lasting effects was the beheading of King Hinsta in 1835. According to Mostert (1992), King Hintsa was killed and beheaded by the British in May 1835 "after he was invited to peace talks by the governor of the Cape, Harry Smith, who demanded 50 000 cattle in compensation for the 1834 war" (Mostert, 1992, p. 724). King Hintsa's brutal murder has been considered by historians to have caused mass trauma and suffering to Xhosa people.

Lalu (2009) details that in 1996, as South Africa's Truth and Reconciliation Commission was beginning its hearings, Nicholas Gcaleka, a healer from the town of Butterworth in the Eastern Cape, set off on a journey to Europe to retrieve the skull of King Hintsa following "his claim that King Hintsa's spirit would remain restless until his skull was returned to South Africa from the United Kingdom. Unless the skull was found and returned, Gcaleka argued, peace and social harmony would not occur in South Africa" (Mkhize, 2009, p. 211). Gcaleka's claims were contested by members of the Xhosa Royal House who "denounced him as a fraudster and charlatan" as subsequently, forensic tests proved that the skull he brought back was "most likely that of a middle-aged European woman" (Mkhize, 2009, p. 218).

Mkhize further argues that "the contestation over the evidentiary methods employed to ascertain the identity of the skull was really a contestation over the paradigms and idioms informing the narration of history in the post-apartheid South African public domain" (Mkhize, 2009, p. 211). However, some members of the Hintsa family reject the notion that the King was beheaded at all. According to Mkhize (2009), Douglas Hintsa, a direct descendent of King Hintsa, said;

"One thing we don't agree – how can a senior councillor bury a headless king? Because the story should have definitely leaked out, that the king was buried without his head. And also, if

Hintsa was beheaded, how did that head go past Grahamstown without people knowing? The reason for that is because we know that they cut him, cut his ears, his cheeks, took his teeth with a bayonet and we know Southey and his crew brought those tissues into Grahamstown."

- Douglas Hintsa cited in (Mkhize, 2009, p. 215)

The issue of King Hintsa's skull remains unresolved and the mystery behind his death still taunts many Xhosa-speaking people (Mkhize, 2009). Additionally, the use of divination, dreams and indigenous cosmology in the failed quest to retrieve his skull seemed to have further exacerbated the trauma surrounding the issue of the skull. Mkhize (2009) points out that Nicholas Gcaleka claimed to have received messages about the skull in his dreams and visions from the ancestors. He also claimed to have been descended from the King from his mother's side of the family and thus could communicate with the King's spirit due to the King having been initiated as a traditional healer during his reign.

When the skull he retrieved from the UK turned out to belong to a white woman, it caused him to be branded as a charlatan and further raised concerns about the validity of indigenous spirituality. By the time of Nicholas Gcaleka's quest, there had already been mistrust of diviners and their methods that had been brewing within Xhosa society. Some of this distrust stemmed from the failure of the cattle killing movement in the nineteenth century which ushered the end of Xhosa resistance to colonial conquest.

2.7 The cattle killing movement of 1856

The Xhosa cattle killing movement took place between 1856 and 1857. It is regarded as a classic millenarian/revitalization type movement that occurred due to extreme upheaval and trauma brought about by colonization and the disruption caused by the numerous frontier wars. It was precipitated by the visions of a young prophetesses named Nongqawuse who claimed to have encountered ancestral entities at the Gxarha River just north of the Kei River mouth near the Indian ocean. Her visions and their interpretation were further promoted by her uncle, Mhlakaza, who had been a Christian convert working for Bishop Merrimen in Grahamstown area, but who had become subsequently disenchanted with his new faith and

moved back to the tribal region known as Kaffraria (Peires, 1987). In his retelling of the account of Nongqawuse's vision, Peires (1987), states that the event;

happened in one of the minor chiefdoms among the Gcaleka Xhosa, that of Mnzabele, in the year I856. Two girls went out to guard the fields against birds. One was named Nongqawuse, the daughter of Mhlakaza, and the other was very young. At the river known as the place of the Strelitzia, they saw two men arriving. These men said to the girls - Give our greetings to your homes. Tell them we are So-and-so ... and they told their names, those of people who had died long ago. Tell them that the whole nation will rise from the dead if all the living cattle are slaughtered because these have been reared with defiled hands, since there are people about who have been practising witchcraft. There should be no cultivation. Great new corn pits must be dug and new houses built. Lay out great big cattle-folds, cut out new milk-sacks, and weave doors from buka roots, many of them. So say the chiefs, Napakade, the son of Sifuba-sibanzi. The people must abandon their witchcraft, for it will soon be revealed by diviners (Peires, 1987, p. 43)**.**

Peires states that "during the thirteen months of cattle-killing (April 1856-May 1857), about 85 per cent of all Xhosa adult men killed their cattle and destroyed their corn in obedience to Nongqawuse's prophecies. It is estimated that 400,000 cattle were slaughtered, and 40,000 Xhosa died of starvation" (Peires, 1987, p. 43). The cattle killing was a highly traumatic event for Xhosa people, with its aftereffects still being felt by contemporary Xhosa-speaking people centuries after the event occurred. The cattle killing and subsequent famine that followed greatly weakened the Xhosa people, and their "resistance to colonial expansion which the Xhosa had sustained for nearly eighty bitter years was abruptly broken by their own actions, and almost all their remaining lands were given away to white settlers or black clients of the Cape government" thereby causing a large-scale tethering of the relationship that the people had with their land (Peires, 1987, p. 43). A mass grave memorial commemorating the lives of those who died from the ensuing famine is located in King William's Town.

Peires also mentions that the cattle killing movement was more than merely the blind following of Nongqawuse's vision but was rather instigated by the lung-sickness (bovine pleuropneumonia) epidemic of 1853 which saw the death of thousands of cattle in South

Africa. Additionally, he argues that "the resurrection of the dead was only an aspect of a much wider event which the Xhosa believed to be in prospect, namely the regeneration of the earth and the re-enactment of the original Creation. The movement was by no means a 'pagan reaction', but one which combined Christian and pre-Christian elements fused under the heroic leadership of the expected redeemer, the son of Sifuba-sibanzi, the Broad-Chested One" (Peires, 1987, p. 45).

Peires (1987) asserts that the lung-sickness epidemic was the key driver of the cattle killing, however, he does reiterate that these social effects were not observed in other parts of Africa where the pandemic had hit. Rather, amongst the Xhosa-speaking people, it

> "encountered an exceptionally battered and divided society, demoralized by the frustration of a long series of military defeats; by the social insecurity of expulsion from natal lands and pastures; by the material sufferings of migrant labour and of resettlement in cramped and ecologically deficient locations; by the new wealth of those who had climbed on the military-commercial bandwagon of settler expansionism. Such conditions fed and sustained a belief which would have starved on the scepticism of those enjoying economic abundance and social opportunity" (ibid).

He argues that the bovine pandemic hit the amaXhosa at their most vulnerable state and created a domino effect that was not seen elsewhere in Africa. He also argues that without the bovine epidemic, the cattle killing movement would not have occurred.

Other interpretations of the cattle killing movement

There has been some contestation regarding the causes of the cattle killing movement apart from the causes postulated by Peires in his account. Stapleton (1991) offers a hypothesis based on the strained relationships between Xhosa royalty and their subjects in the wake of colonial expansion. As he explains, Xhosa society was heavily feudal, and cattle formed a big part of the traditional economy. Not only were cattle used for milk, but they were also used for bartering and cementing social relationships through marriage or peace-making, especially on the level of the ruling class. Among the Xhosa aristocrats, as Stapleton puts it, "wealth was measured in cattle" (Stapleton, 1991, p. 384). Those who managed to acquire cattle passed down that generational wealth to their children, and therefore a class divide was

drawn between the ruling class and the commoners. This meant that the ruling class could control the movement of cattle and therefore wealth, though a system of patronage. During times of crisis such as drought, the commoners were forced to hand over their cattle to the ruling class to keep the wealth within the aristocracy. The traditional hold the chiefs had on their subjects ensured the survival of this system. However, with the dawn of colonialism, the Xhosa aristocracy's rule was greatly undermined by the colonial authorities and as such their socio-economic influence started to wane.

Stapleton further argues that "when political authority fails and has been physically defeated and thereby humiliated, a society may turn to its religious leaders" (Stapleton, 1991, p. 386). He argues that the prophet Mlanjeni gained a strong influence on the people following the decline of the authoritative aristocracy's power, and as such when Mlanjeni called for the slaughtering of cattle as a means of eradicating witchcraft so that white settlers could be purified from the land, many of his followers followed suit and killed their cattle as a revolt against the aristocracy who owned the cattle in the feudal system. Stapleton posits that it was this vying for power that preceded the bovine epidemic stated by Peires. When the epidemic hit in 1855 some Xhosa people had already started killing cattle.

The great loss of cattle from the epidemic further increased anxieties around killing cattle when Nongqawuse had her vision in 1856 such that chiefs supported the movement out of fear of another revolt against their power. When Nongqawuse's vision was validated by another vision from a girl named Nonkosi from the Ndlambe chiefdom, many other Xhosa chiefs joined the movement. According to Stapleton, the cattle killing movement was not only inspired by Nongqawuse's vision, instead, it was a culmination of events stemming from the socio-political instability within Xhosa society that was further exacerbated by increased colonial influence (and Christianity) and the devastating bovine epidemic.

The impact of Christianity on indigenous spirituality during and after the cattle killing movement

Historically, Christian missionaries in South Africa attempted to discredit the validity of indigenous spirituality by labelling it as demonic and unholy (Mtuze, 1999). In the process of doing so, missionaries failed to consider the significance of indigenous culture to wellbeing in their attempts to Christianise indigenous South Africans. The introduction of Christian beliefs amongst Xhosa-speaking people, therefore, negatively affected the views of

indigenous practices as a valid form of spirituality and as such negatively affected their wellbeing. Mndende (2021) posits that the decline in indigenous Xhosa spirituality is equitable to a form of moral decay, as Xhosa spirituality is deeply grounded in ubuntu and respect for nature. She further argues that the value of indigenous Xhosa spirituality is that it encompasses not only religious practice, but stretches to include family life, community wellbeing and care for the natural environment.

She argues that those who practice Xhosa spirituality are an asset to their communities because this way of life "includes the moral, spiritual, social, mental, and also the physical development of the members of their communities" (Mndende, 2021, p. 196). Mokhoathi (2021) agrees that indigenous Xhosa spirituality offers a system of morality that seeks to organize the ethical foundations that sustain the values of Xhosa society. Mtuze (1999) attests to the significance of indigenous spirituality as a form of moral compass that guides indigenous Xhosa life by asserting that spirituality was the foundation on which Xhosa society was built. He further argues that the seizing of land through colonial expansion was the bedrock on which Christian thought could penetrate Xhosa society because "the attack on indigenous spirituality was greatly linked to the attack on land…Take away the land, and you have taken away the blessings of the ancestors" (Mtuze, 1999, p. 9). The introduction of Christianity weakened Xhosa society by casting doubt on the validity of traditional modes of spirituality.

The interlink between spirituality and land was further showcased in the actions that followed Nongqawuse's vision. As part of the rejuvenation of the land that had been violated through war and colonialism, the people were encouraged to burn the land as a means of cleansing it and to strengthen the connection between people, land and ancestors. The movement placed a great deal of emphasis in the purification of the land as a means of resistance. However, the cattle killing movement did not achieve this but instead broke the political and cultural integrity of Xhosa-speaking people and in the process "gave a lot of credibility and leeway to the Christian culture whose protagonists had always warned against the disaster of embracing a heathen culture" (ibid). According to Pauw (1975), the failure of movement severely undermined trust in traditional forms of prophecy and religion, especially the use of dreams as reliable sources of information. Lalu (2009) posits that Nicholas Gcaleka's quest to find King Hintsa's skull revealed this age-old conflict as the mistrust in divination greatly led to

his being labelled a charlatan. The controversy surrounding the quest to find the skull did not address this trauma but instead exacerbated it.

Furthermore, the decline of indigenous Xhosa spirituality was greatly linked to the violation of the land, and subsequently this undermined the people's connection to it. During the time of the cattle killing, Christianity had already started to spread, and tensions were rife between those who were labelled as *amagqobhoka* (meaning those who have been pierced by Christianity) and those who were labelled *amaqaba* (referring to the red ochre traditionally worn by Xhosa people). Being *amagqobhoka* was seen as a betrayal of tradition and was not welcomed by traditionalists during the cattle killing movement. Many of those who were labelled as *amagqobhoka* were ostracised and blamed for the failure of the cattle killing movement.

Mokhoathi (2021) hypothesises that "the synthesis of Christianity and African Traditional Religion in the Eastern Cape is a phenomenon that began with the religious encounter between Van der Kemp (a Christian missionary) and Ntsikana (Mokhoathi, 2021, p. 152). Ntsikana had substantial influence in terms of spiritual practice among the Xhosa-speaking people as he was a highly respected diviner, prophet and chief advisor to chief Ngqika. Much of Ntsikana's preaching focused on the impurity of the land through war and conflict. He was a strong advocate of peaceful resolution to conflict and was opposed to taking up arms against the colonial forces, and "he encouraged Ngqika to adopt the Bible, and prophesied about a coming Messiah who would bring peace to the land" (Kumalo, 2014, p. 29).

He did not however fully break away from Xhosa tradition, rather, he tried to merge the two by adopting the Christian deity as the supreme being that had the power to purify the land. This was in opposition to what Mlanjeni preached, who had asserted that the land was suffering because of witchcraft. Much of Mlanjeni's preaching emphasized the need to purify the land by ridding it of witches and wizards (Bokwe, 1914). The emphasis on healing the relationship between people and land became a talking point in Mlanjeni's earlier critiques of Christianity, granting him substantial support from royal chiefs and traditionalists.

The tension between traditionalist and Christians continues to this day. According to Pauw (1975) many contemporary Xhosa-speaking people practice a blend of indigenous spirituality and Christianity, and that indigenous spirituality is no longer only practiced by 'Red' people (*amaqaba*), but also by the educated people. This is because Xhosa-speaking people make

sense of the world through their worldview that deeply links people to land as a means of belonging. Although Christianity has been widely adopted after the cattle killing movement, it has not fully managed to erase indigenous spirituality because it cannot serve to provide Xhosa-speaking people with the same deep sense of belonging to the land that indigenous spirituality can. In most cases, the two are intertwined and practised side by side. However, for many families this blend is not always smooth.

Additionally, this hybridization of indigenous spirituality with Christianity resulted in the emergence of African Independent Churches (AICs), also known as African Initiated Churches, in the late 19th century. The emergence of such churches was driven by a desire for independence from white-controlled mission churches and a need to express Christianity in ways that were relevant to African culture since at the time many African Christians often faced racial discrimination and were denied equal leadership positions with white church leaders within mission-established churches. These churches differed from conventional churches in the sense that they prioritised an expression of African spiritual practice, such as ancestral veneration, in a time when indigenous South Africans were in the broader struggle for freedom and human dignity during the colonial era. As a result, these churches preached a gospel which included the use of African cultural resources such as rituals, *imphepho* and visits to sacred sites in the natural environment as part of worship. By doing so, the churches affirmed an African Christian identity, promoting cultural pride and self-reliance during a time when African spiritual practices were heavily demonized within conventional Christian spaces. Masondo (2014) refers to this as a form of “cultural justice” that he defines as the process where “all citizens are able to draw on their cultural resources without any fear of being discriminated against” (Masondo, 2014, p. 1).

However, the emergence of such churches also exposed the challenges that come with the religious syncretism of Christianity and "traditional religion" and the question of Africanization. Pauw (1975) additionally asserts that it is within the homestead that the conflicts between the two competing spiritualities can be clearly observed. The largest conflict is observed in relation to rituals, ancestral veneration, use of traditional medicines and divinationdas. Within many Xhosa homesteads there are often cases where Christianity and indigenous spirituality are blended. This is observed during traditional offerings to the ancestors where the Christian prayer is included in the proceedings. However, there have been cases where breakdowns in kinship and family ties leads to a decline in indigenous

practices within the homestead. This breakdown results from those who have adopted Christianity within the framework that indigenous spirituality is evil and demonic. Those who have adopted this way of thought reject all forms of traditional ceremony and refuse to participate in any ancestral veneration, including the consultation of healers and the use of traditional medicine.

The breakdown of kinship and family ties often creates cycles of intergenerational trauma because Xhosa-speaking people associate strong family relationships to resilience and wellbeing in times of great adversity (Smith, 2006). Xhosa-speaking people operate from an understanding that when kinship relationships are broken, wellbeing becomes compromised. The historical trauma of apartheid and forced relocations greatly impacted these crucial kinship bonds. Many families were broken up by the migrant labour system that forced indigenous people to relocate from their homes in search for work. Such policies undermined the indigenous worldview and as a result had a lasting effect on Xhosa society.

2.8 Apartheid and the forming of Bantustans/Homelands

During the period of 1899-1902, conflict between the Afrikaner Boers and the British culminated in the South African War (Mostert, 1992). After the war, the newly formed colonial government passed the Native Lands Act of 1913 that separated South Africa into areas in which the indigenous population was forced to reside on 7.5% of the land and where European settlers were granted 92.5% of the land (Hamann & Tunder, 2012). The remote areas where the indigenous people of South Africa were forced into after the promulgation of apartheid came to be known as the Bantustans or the Homelands (Mostert, 1992). The Bantu Authorities Act of 1951 legalized the forced movement of indigenous people into the Bantustans across the country. In the Eastern Cape, two such Bantustans were created: the Transkei in 1951 and the Ciskei in 1961. In this section, I will detail the events that led to mass trauma during this time.

Homeland policy in the formation of the Ciskei

The Promotion of Bantu Self-Government Act of 1959 set the bedrock for the homeland policies of the apartheid government that assigned black people to homelands. Halbach (1988) states that these policies were designed for what the apartheid authorities called separate development, although extraordinarily little development occurred for the black population

under these laws since “the main intention of the South African homeland policy has always been to guarantee the white minority's existence and supremacy in the remainder of South Africa” (Halbach, 1988, p. 509). This was achieved by intentionally keeping the homelands underdeveloped so that they served as reservoirs for cheap migrant labour. There were few economic opportunities in the homelands, making it necessary for people to migrate into the metropolitan areas to find work. In total, ten homelands were created in South Africa, with two being in the Eastern Cape province.

The Ciskei homeland was named so because the term “is composed of the Latin prefix ‘Cis’, indicating that it lies on the Cape Colony side of the Kei River; and ‘kei’ is a Khoisan word meaning ‘clear or shiny’” (Cindi, 2018, p. 2). Under the Union of South Africa, the Ciskei was governed by a system known as *Bhunga* which was comprised of indigenous leadership and headmen in an indigenous council that oversaw the region prior to the formal establishment of the Ciskei territory. The council had been installed by colonial authorities who also integrated educated Xhosa leaders into the council as a means of keeping track of the indigenous population. According to Cindi (2018), the indigenous council took an indigenized approach to governance by taking an open assembly approach which was fashioned after the indigenous Xhosa *inkundla* (court) system, thus “these *inkundla* were autonomous and took decisions collectively” although they held little power compared to the colonial authorities (ibid). The indigenous councils in the Ciskei would eventually make way for the homeland system of the apartheid government following the adoption of the Bantu Authorities Act of 1951. The Ciskei region officially became an independent territory within the Republic of South Africa and consequently had its own government in 1972 (ibid). The towns which fell under the jurisdiction of the Ciskei included Mdantsane, Zwelitsha, Hewu, Herschel, Glen Grey, Victoria East, Keiskammahoek, Peddie and Middledrift. The first elected political leader of the Ciskei was Thandathu Jongilizwe Mabandla, who himself had been an indigenous royal leader of the amaBhele clan.

In 1972 Lennox Sebe formed the Ciskei National Independence Party (CNIP) after breaking away from Mabandla (Cindi, 2018). He later became the next leader of the Ciskei territory and ushered in a plethora of policy changes that eventually led to a resistance movement to oust him. Prior to his ousting, Sebe had appointed himself Chief of the Khambashe, a clan within the amaGqunukhwebe chieftaincy due to his proximity with the Xhosa royal houses in the region although he himself was not royalty. Cindi (2018) argues that Sebe made this bold move

to associate himself with royalty because chiefs were held in high esteem at the time. Sebe's forceful and boisterous nature influenced much of his leadership style throughout his years in office. He is described as having "ruled the Ciskei with an iron fist and ruthlessly crushed his opponents" (Cindi, 2018, p. 3). However, Sebe's attempts to align himself with royalty proved futile as the failures of the *bhunga* traditional systems as well as of the black leadership of the Ciskei to properly govern and bring stability greatly affected the trust in traditional leadership styles as was evidenced by many of the revolts that followed Sebe's reign.

The trauma of political violence in the Ciskei

According to Manona, "since achieving independence in 1973, the Ciskei had never enjoyed any peace or stability" (Manona, 1990, p. 14). This was because Sebe ruled with brute force and violently suppressed his opponents by either banning political parties, placing people in unfair detentions and orchestrating state-sanctioned violence that often led to many deaths and injuries. What was supposed to be an independent territory which protected and advocated for the rights of Xhosa-speaking people turned out to be a violent operation run by a violent autocrat. In August 1985, Ciskei police officers set gun fire on civilians who had been protesting an increase in bus fares in the Egerton railway station in Mdantsane, killing 11 people in what was to be known as the Egerton massacre (Cindi, 2018) (Evans, 2023).

Months prior to the massacre, in July 1985 students at the Nompendulo High School in the Ciskei capital of Zwelitsha were brutally beaten, shot and killed by Sebe's government whilst protesting for the end of race-based discrimination in education. Under the leadership of Sebe, Ciskei police killed four students and injured a hundred (Cindi, 2018). Manona (1990) argues that it was Sebe's violent and oppressive tendencies that eventually led the people to revolt against his leadership. This revolt was further fuelled by the people's desire to be reintegrated into the national South African government, an option that they saw to be better compared to the tyranny they were subjected to under the Ciskei government. Manona further argues that the revolt reached its peak in 1990 when rural residents of the Ciskei burned their CNIP cards in protest, demanding the end of the Ciskei regime.

Prior to the revolt, military leader, Brigadier Joshua Gqozo enacted a coup on Sebe in March 1990, inserting himself into power as the new political leader of the Ciskei (Manona, 1995). However, even Gqozo himself proved to be a tyrant and enacted horrendous acts of violence on the people he was tasked to lead. Gqozo showed his iron fist in his violent squashing of a

protest led by the African National Congress (ANC), which had galvanized about 80 000 people in Bhisho in 1992. The Ciskei military unit, the Ciskei Defence Force (CDF), fired shots at the crowd and killed 28 people while injuring 200 (Evans, 2023). This event was known as the Bhisho massacre. A monument was erected in 1997 by the new democratic government in memory of the deceased. According to Evans, "the massacre brought South Africa to the edge of the 'abyss', persuading politicians on all sides to resume negotiations lest the country descend into an all-out civil war" (Evans, 2023, p. 288).

Manona observes that the dissatisfaction with the Ciskei regime was in fact with "the legacy of the implementation of the homeland and tribal authority systems" under the Black Authorities Act of 1951, which placed significant governance power on headmen elected by the apartheid government as a means for the apartheid regime to rule over the lives of indigenous people (Manona, 1990, p. 15). These authorities were mostly inefficient in their duties due to rampant corruption and maladministration. Additionally, they were "merely a homogeneous body of mostly old men, many of whom had only a few years of schooling… therefore it could not be the focal point of rural administration capable of promoting the general well-being of these villages which inadvertently affected their ability to govern effectively" (ibid).

Ubink & Duda (2021) describe the customary law by which these authorities governed as fundamentally autocratic. The lack of a true democratic structure resulted in people feeling like their voices were suppressed and their wishes ignored. The resistance to the Ciskei government was the result of inadequate, inefficient, authoritarian, corrupt and unrepresentative governance which failed to meet the needs and wellbeing of the people it was meant to govern (Manona, 1995).

Migrant labour and the breakdown of indigenous family structure in the Ciskei

Cecil Rhodes, a colonial figure, was responsible for ushering a taxation system on indigenous people through the Glen Grey Act of 1894, which mandated that each male-headed household in the colony should pay taxes to the Cape government. To afford paying the tax, many indigenous men were forced to work as wage workers on white-owned farms, thereby creating a constant pool of labourers for the Cape Colony. Although the Bill was designed to legislate wage work for the farming industry, it was later adopted by the mining sector as a means of securing cheap labour for the mineral industry (Nomvete, 2021).

Later, the Cape government would enact the Hut tax, in addition to the existing Poll tax, demanding that all indigenous males above the age of 21 years, married or unmarried, pay tax to the colonial authorities. Failure to do so was made punishable by law. This action further coerced indigenous people into the migrant labour system. According to Nomvete (2021), under the Hut tax law "a wife was regarded as a hut and therefore, depending on the number of wives each native male had, tax was payable per head" (Nomvete, 2021, p. 36). The oppressive system of taxation, coupled with the lack of economic opportunities in the homelands forced many people to leave their homes and families to go work in the urban areas, resulting in the breakdown of indigenous family structures. The effects of the migrant labour system on black families are still with many families having to deal with broken kin relationships as a result of this policy.

Vosloo describes the migrant labour system's insistent need to move people back and forth as a "system used to reconcile the conflicting need for cheap labour in the mines and cities, with the apartheid ideology that workers should not reside there on a permanent basis" (Vosloo, 2020, p. 1). The discovery of gold in Witwatersrand in 1886 and diamonds in Griqualand West (now Kimberley) in 1866 increased the need for cheap labour into the mining industry, which the authorities sourced from the homelands. Most of the labourers had minimal education, thus making them extremely vulnerable to abuse. In fact, workers were usually housed in hostels that were overcrowded and unsanitary and were given very little opportunities to improve their living or working situations (Vosloo, 2020).

Mazibuko (2000) argues that the workers were subjected to extreme abuse and exploitation with many of them having left their wives and children in the homelands where they were faced with the challenges of running households without their men and a lack of support. The wellbeing of the children of these families was greatly affected, resulting in developmental disparities (Mazibuko, 2000). The migrant labour system had a destructive impact on the family lives of indigenous people as it separated families, thereby affecting indigenous people's way of life. Many of the workers who migrated to the cities rarely had the financial means to visit their families often, resulting in the breakdown of kin relationships.

The migration of men away from their households "demonstrated quite clearly the ill-effects that can follow the absence of the head of a household, or the able-bodied males who should be looking after the cattle or ploughing" (Blacking, 1964, p. 20). Additionally, Blacking further argues that the loss of men in these families and communities had a negative impact

on the relationships on which indigenous society is built, thereby resulting in severe disruptions in kinship dynamics. In indigenous Xhosa society, children are the future generations of the clan that will inherit both the lands and the customs of the clan. The survival of the kinship system therefore depends on the bearing of children and the transfer of family knowledge from their fathers and grandfathers. Fathers, uncles and grandfathers also pass on knowledge about agriculture and livestock, which are an important element of the rural indigenous economy as cattle are used as currency for rituals ranging from birth, marriage, health management and death.

The removal of men from these communities created a breakdown in the transfer of knowledge within kinship systems which are vital for sustaining the indigenous economy such that "when the economically important persons are absent, the result is destruction of the land, and insecurity for the families who live on it" (Blacking, 1964, p. 22). The loss of men consequently resulted in the increase of female-led households, which further exacerbated tensions between men and women as gender roles were reversed and challenged in the process. These historical factors had lasting effects into contemporary times.

Mager (1999) argues that the tensions observed from these historical disturbances were coupled with the lack of access of women in the political and decision-making structures of the Ciskei which legitimized male domination and emphasized male control over women's lives. Additionally, the legitimization of male dominance further created tensions as women were primarily the ones responsible for raising the children, ploughing and maintaining the fields, and hence played a crucial role in the building of economic resilience within affected families and communities.

Furthermore, Mager (1999) argues that the migrant labour system and the resultant increase in poverty led to a decline in the value of bride wealth, thus placing women in vulnerable positions as this greatly changed the value of womanhood which was reflected in a rise in gender-based violence towards women as the expression of masculinity came to be associated with the exertion of control over women. The disruption of kinship relationships also negatively affected the spiritual wellbeing of the affected families and communities as healthy family dynamics are crucial in the generational transmission of knowledge about ancestral rituals and ceremonies that are geared to maintain security, health and wellbeing within the kin group (Ohajunwa, 2019).

The loss of kinship because of the migrant labour system "generally resulted in increased poverty and misery for its victims" (Sharp & Spiegel, 1985, p. 134).

While Halbach (1988) describes the homelands as being reservoirs for migrant labour, Kane-Berman (1980) describes them as dumping grounds where those who cannot find work were permanently demarcated to live the rest of their lives in destitute.ai poverty and lack of opportunity to improve their lives in any significant way. However, poverty in the homelands was not experienced in equal degrees. There were those people who found work in the homelands by migrating from the rural periphery into the urban economic hubs where employment opportunities were available, creating a black working class. In the Ciskei, these urban economic hubs were found mainly in the industrial sectors in East London, Dimbaza, Zwelitsha, Berlin, Keiskammahoek, Sada and Port Elizabeth, resulting in the concentration of working-class black people in these areas (Cindi, 2018).

The ushering of women into the working class also greatly contributed to the disruption of gender roles as women had options to self-sufficiency stemming from economic independence. The period saw many changes in rural South Africa, particularly as it pertains to rural mobility as people moved between the rural villages and cities for work. Mager (1999) asserts that women's access to work experience greatly altered their social position as they gained economic capital and consequently affected the way women viewed themselves thereby allowing them to resist male domination. This shift saw more women being involved in family ritual practices such as veneration of the ancestors, a practice that was traditionally dominated by men.

According to Ainslie (2014), the shifts in consciousness in women consequently shifted male-female relations within households and communities. As women started to participate economically, men's positions as the heads of households began to shift as well in terms of decision making. Men found themselves in a position where "their corporate, patriarchal control of ritual performance itself threatened" and as a result were "emasculated and their social position under threat" (Ainslie, 2014, p. 531).

In contemporary times, these shifts in male-female dynamics have made men more eager to assert themselves *intloko yekhaya* (head/patriarch of the family). Contemporary women have responded to the increased male eager for dominance by asserting themselves financially within their families and communities. Modern Xhosa-speaking women have not abandoned

tradition, nor do they seek to, rather they have "worked with in and around notions of tradition to create new identities" and as such have allowed themselves to foster a resistance to male domination that sees women visible within their homes and communities (Banks, 2002, p. 634). This increased visibility has allowed women to assert themselves both economically and politically, as they have taken up positions of leadership at governance level in modern-day Eastern Cape. With the increased visibility of Xhosa-speaking women came shifts in their participation in ancestral rituals and ceremony, as will be detailed in my personal narratives in Chapter 6.

Shifts in indigenous ritual practices post-apartheid in the Ciskei

As much as the apartheid government wanted to establish a reliable source of migrant labour for the industries, there was also an insistent push to control the influx of labour and black lives. This achieved through policies that were geared to keep much of the indigenous population in the homelands. The policy of Betterment Planning sought to divide the homelands into residential areas, agricultural areas as well as grazing lands (de Wet, 1989). In the implementation of this policy, many rural indigenous families were moved from their previous homes which were scattered throughout the rural landscape into the newly demarcated residential areas or 'locations' to allow the government to set aside land for agriculture and industry. These moves were messy and wreaked havoc on indigenous families as many of them were forced to cull their animals. There was not enough grazing land for them in these new locations to where they were moved.

These actions contrasted with the Tomlinson Commission's proposal, which recommended that betterment planning should ensure that each household should be guaranteed enough arable land and grazing land to make sure such families could successfully live off the land (de Wet, 1989). However, the apartheid government rejected this proposal due to fears that granting black families sufficient land and agricultural resources would make them self-sufficient and therefore less dependent on labour wages, which would undermine the government's attempts to keep the homelands as reservoirs of migrant labour. de Wet & Mgujulwa (2020) describe the process of betterment planning as the forced villagization of indigenous people in the sense that they were moved "from their small patrilineal-kinship-based residential clusters into larger, more concentrated residential areas; they were thus effectively forcibly villagized" (de Wet & Mgujulwa, 2020, p. 246).

This forced “villagization” created problems for the affected families in terms of ancestral connections. Xhosa-speaking people regard health to include balanced relationships between the living kin, their ancestors and the environment. Land and ancestral spirits are interlinked (May, 2019). Amongst Xhosa-speaking people, the removal of the kin from the land where their ancestors were buried is understood to have a negative impact on the wellbeing of the kin. In response to the forceful removals of betterment planning, new forms of rituals have emerged to remedy the situation by effectively “collectively bringing the ancestors of an entire local agnatic cluster from the old settlement areas to the new villages” (de Wet & Mgujulwa, 2020, p. 246). One of these rituals, known as *ukulanda amaxhego* involves the ‘fetching’ of the ancestral spirits that were buried in the former lands into the villages the kin were relocated to during the betterment planning process. These rituals in effect serve to maintain the kinship bonds between the living clan members and their deceased ancestors, thereby ensuring that relationships between ancestors and kin remain stable as this is important for the maintenance of good health and wellbeing.

As an indigenous healer from the Peddie area, I have assisted many families in performing such rituals. The process usually involves fetching the spirit of the ancestor by visiting the old site where the agnatic cluster used to reside before they were relocated. Upon arrival, prayers are made to ask the ancestor to allow for their spirit to be relocated. Usually, offerings are made at the site to appease the ancestor. Upon return from the sacred site, an animal sacrifice is made in honour of the fetched ancestor. These rituals are performed after someone in the family has received a dream instructing them to fetch the said ancestor. Sometimes families consult with a diviner after a series of misfortunes or illness have engulfed the family.

From the divination, the diviner might suggest that a ritual to fetch the ancestors be performed. In most cases “the timing of the ritual seems related to particular circumstances in people’s homesteads. A person may be told by the ancestors to do so in a dream” (de Wet & Mgululwa, 2020, p. 247).

This ritual is a relatively new one in Xhosa culture as it emerged as a response to the forced removals of the Betterment Planning policy, with de Wet and Mgulujwa (2020) estimating that the ritual emerged about 40 years ago. According to the authors, the *ukulanda amaxhego* ritual is an amalgamation of three old rituals that have been merged into one. That is, the *ukukhapha* ritual which is performed after the death of an ancestor to usher them into the afterlife, the *ukubuyisa* ritual which is performed to bring back the ancestor into the family

space from the afterlife, and the *ukuvula umzi* ritual which is performed to introduce the new family homestead to the ancestors so that they can protect all those who reside in it. This shift in ritual practice showcases the adaptability, innovation and resilience of Xhosa-speaking people in the face of adversity. Innovative changes in ritual such as these demonstrate both innovation and post-traumatic growth within the population as the people are willing to adapt their customs to fit their current situation.

In the frame of traumatic experience, Post Traumatic Growth (PTG) refers to the positive psychological transformation experienced following a struggle with trauma. These changes are observed in the survivor's self-perception, interpersonal relationships and general outlook on life. Survivors of trauma can exhibit increased self-awareness and an open attitude towards reconciliation (Dell'Osso et al., 2022). From this viewpoint, the area of 'growth' rests in the ability to be more tolerant, compassionate and forgiving towards others. Factors that can influence active coping strategies include access to social support and the availability of social resources that are orientated towards promoting increased feelings of hope. The availability of support mechanisms plays a key role in shaping the survivor's psychological trajectory. Additionally, the cultural context in which the healing is taking place matters as this can shape the value systems on which the survivor bases their understanding of forgiveness.

In the South African context, the Truth and Reconciliation Commission (TRC) played a role in shaping post traumatic growth by facilitating the process of forgiveness and reconciliation following apartheid. The TRC, year 1995-2002, was established to address historical trauma in South Africa by providing a platform for victims to share their stories, and by also in the process granting amnesty to some perpetrators**.** Throughout over 2,500 hearings, the TRC made recommendations for reparations in housing, healthcare and education for the descendants of apartheid victims. The newly appointed democratic government of 1994 focused on fostering forgiveness by advocating for the adoption of ubuntu in the process of reconciliation. This was achieved by enacting the Promotion of National Unity and Reconciliation Act which "focused on the construct of restorative justice rather than on retributive justice" (Stein, et al., 2008, p. 463). Through the adoption of ubuntu as a value system, the Act sought to foster national unity under a shared sense of morality.

Many scholars have critiqued the effectiveness of the TRC and whether the country has been able to fully take up its recommendations. In her critique of the TRC process, Motlhoki

(2017) argues that "while it is hailed as an international model of healing and reconciliation especially across races, the TRC appears not to enjoy the same prestigious status in South Africa. Extreme views on its effectiveness are that it robbed black victims of apartheid of a chance to access genuine healing and closure" (Motlhoki, 2017, p. 12). From a collective consciousness perspective, South Africa is a country that has endured deep traumatization and as such "might have expected more than was possible from a mere transitional justice mechanism" (ibid). The TRC served to encourage national building through forgiveness but did not serve to advocate for the prosecution of violent crimes, and therefore did not really offer closure.

Additionally, Hayner (2001) regards the "SATRC to be a hybrid model encompassing the South African indigenous concept of Ubuntu and notions of accountability like penalty or reparations" (Hayner cited in Motlhoki, 2017, p. 13) but without the actual penalty part taking place in terms of prosecution. However, as Motloki argues, the TRC was a transitional justice mechanism and as such was not able to address the full extent of the trauma that occurred throughout South Africa's turbulent history.

From a mental health perspective, the efficacy of the TRC's approach was scrutinized since no prosecutions were made. Yet, the victims of these crimes were encouraged to forgive and move on. The process was further contentious since victims were encouraged to relive their traumas to testify but some who testified reported that the mental health treatments offered were not adequate (Stein, et al., 2008). Whether or not the TRC was indeed successful in fostering true and lasting forgiveness is also a contested issue. A study by Kaminer et al. (2001) found that amongst South Africans who had experienced extreme violence and human rights abuses there was heightened levels of psychopathology, and lowered levels of forgiveness.

Additionally, the South Africa Stress and Health Study (SASH) was conducted after the completion of the TRC to track the efficacy of the process in terms of mental health. The study found that some of those who testified found the process painful and re-traumatizing, thereby resulting in feelings of low forgiveness (Stein, et al., 2008). Although the TRC was viewed positively by South Africans in the process of nation building, scholars agree that people who have suffered extreme human rights violations need more than 'talk therapy' to assist them through the process of healing. There are much more nuanced interventions that

need to be taken into consideration when dealing with complex trauma, especially if remnants of that trauma are still visible in the day to day lives of the victims.

The inclusion of culturally relevant healing strategies has the potential to facilitate deeper healing from complex trauma. From this viewpoint, indigenous healing cosmologies offer unique interventions on trauma and its healing. These cosmologies emphasize the importance of integrating culturally relevant spiritual approaches since in this worldview trauma is regarded as a disruption within an individual's relationship with themselves, their family, community and the natural world.

This thesis offers unique insight into how within the South African context, indigenous healing cosmologies play a role in shaping understandings of trauma experience. My experience as a traditional healer who specializes in trauma care allowed me to explore how connections to the ancestors, rituals and dreaming play a role in facilitating healing within the Xhosa cultural context. Hence the highly autoethnographic nature of this study.

2.9 Conclusion

The historical events that are understood by scholars to have contributed to the trauma experienced by the general population of Xhosa-speaking people were discussed and placed within the context of the study area's geographical region. This chapter served to highlight the much broader concepts of trauma that have occurred in the study region from which the participants come from. The following chapter details the theoretical and conceptual frameworks that underpin this research.

CHAPTER 3: Theoretical underpinnings and critical frameworks of the study

3.1 Introduction to the chapter

Latshonilanga (Mama ndizohamba)

Latshonel'ezintabeni (Mama ndizohamba).

Translation: Even when the sun sets, Mama I will keep going.

I received this song during my first year of the PhD journey when I was battling with my mental health. The ancestors explained to me that amid the battle, I must remain resilient. They explained that this song represents the concept known as "ukomelela". This concept refers to the process of understanding one's pain so that it can be healed from the root. As the ancestors elucidated, healing pain requires deep introspection coupled with a willingness to understand the dynamics of suffering so that one can avoid feeling isolated from others during the healing process. This way, one can recover from adversity through both individual and collective means. Thus, *ukomelela* encompasses not only individual coping mechanisms but also the capacity for community bonds to aid in building resilience. Greeff & Loubser (2008) describe the process of building resilience within the Xhosa context as deeply spiritual in the sense that indigenous spirituality acts as a coping resource. In my personal journey of *ukomelela*, the ancestors guided me through the process of conceptualizing suffering so that I could understand how to overcome my challenges.

This anecdote is suitable for describing the purpose of this chapter, which is to provide the theoretical and conceptual framework that informed this study. This chapter serves to describe the key models of historical trauma theory (HTT), including key ideas about the intergenerational transmission of trauma. The models of HTT are applied in the context of the Xhosa-speaking people as a means of understanding the possible pathways in which historical trauma might be transmitted in this population. Additionally, cultural modes of building resilience are explored through the conceptual lens of Mpondo Theory. Canham (2023) describes Mpondo Theory as a framework for understanding how Xhosa modes of resilience are rooted in indigenous spirituality such that cultural identity forms the foundation on which historical challenges and systemic oppression are healed. Furthermore, the chapter

explores the theoretical concepts of collective memory, dreaming and healing landscapes in the creation of knowledge that has applications for healing in the Xhosa context.

3.2 Historical trauma theory (HTT)

According to Sotero (2006), historical trauma theory (HTT) is a relatively new concept in public health, and hence in her work she presents a conceptual framework that illustrates how historical trauma might play a role in disease prevalence and health disparities. She describes historical trauma theory as a new concept thus, "empirical evidence presently offers weak support for the validity of the theory and its connection to contemporary health disparities" (Sotero, 2006, p. 94). However, there are many valuable insights that the theory offers in terms of understanding the complexities of trauma transmission from one generation to the next in a population that has experienced cumulative trauma, and as such Sotero's model may prove useful in understanding the dynamics of trauma transmission amongst Xhosa-speaking people who themselves are a group that has experienced cumulative trauma.

The critical underpinnings of historical trauma theory

According to Sotero, there are four assumptions that underpin historical trauma theory with them being: 1) mass trauma is deliberately and methodically inflicted; 2) trauma is experienced continuously over time and is not limited to a single incident; 3) experiences of trauma echo throughout the affected population, and 4) the scale of the trauma disrupts the population resulting in a "legacy of physical, psychological, social and economic disparities that persists across generations" (Sotero, 2006, p. 94). Additionally, the author argues that "the three basic constructs of the theory are the historical trauma experience, the historical trauma response, and the intergenerational transmission of historical trauma" (Sotero, 2006, p. 95).

According to this interpretation, people who have experienced multiple mass traumatic events eventually end up being handicapped by their trauma because it creates cycles of disruption that can last for generations. These disruptions can echo throughout the population, resulting in the intergenerational transmission of the trauma responses that accompanied the original traumatic event. Considering that Xhosa-speaking people have undergone multiple traumatic events throughout their history, as outlined in the introductory chapter of this thesis, the disruptions that are observed in the population can be explained by Sotero's model.

Sotero further highlights that in essence "historical trauma originates with the subjugation of a population by a dominant group, and successful subjugation requires at least four elements: (1) overwhelming physical and psychological violence, (2) segregation and/or displacement, (3) economic deprivation, and (4) cultural dispossession" (Sotero, 2006, p. 98). These are all elements that have occurred within the Xhosa-speaking population, further highlighting the extent to which the transmission of the trauma throughout the subsequent generations has happened. The application of this model in the context of Xhosa society can shed light on how devastating historical events have had a lasting effect on the subsequent generations that followed, although they were not there for the original traumatising events. An example of this would be the trauma of the cattle killing movement of 1856, which in turn was passed down through the social memory of the group through teachings, values and attitudes towards the validity of traditional spiritual systems. Although contemporary Xhosa-speaking people were not present for the event, many of them know about it as this information was passed down through the rejection of traditional customs and spirituality within families and communities (Mtuze, 1999).

Hence then, using Sotero's model, we can ascertain that the original trauma event reverberated throughout the population, resulting in a trauma response that rejects indigenous spirituality as a valid source of knowledge. This rejection of indigenous spirituality has had detrimental effects of families by undermining the close family bonds on which the kinship system is based. As stipulated by the indigenous Xhosa health model briefly presented in the introductory chapter, breakdowns in kinship relationships can lead to compromised wellbeing.

Ankersmit's theory of historical trauma

According to Ankersmit (2002), trauma greatly influences human experiences of reality. To summarise this theory, Ankersmit asserts that:

> "What is typical of trauma is precisely an incapacity to suffer or to assimilate the traumatic experience into one's life-history. What comes into being with trauma is not so much an openness to suffering, but a certain numbness; a certain insensitivity as if the receptacles for suffering have become inadequate to the true nature and the proportions of suffering. It is in this way that a dissociation has come into existence between suffering itself and the awareness of this suffering; although the two always

> and inevitably go together, it is here as if, when being in pain, I experience my pain as being a mere, though absolutely reliable sign that someone (i.e. myself) is in pain, while not actually feeling the pain itself. While being in pain myself I now feel tempted, so to speak, to look at myself from a point of view that no longer, or at least no longer automatically, coincides with myself as the person who is in pain." (Ankersmit, 2002, p. 78)

Ankersmit's theory claims that trauma creates a state of disassociation that stems from the challenge of trying to make sense of the pain one has endured, and this can influence the way one sees themselves. Therefore, from this theory, we can assume that when a group of people have been hampered in their development by their historical trauma, the traumatic experiences and the feelings that they invoke cannot be emitted from the consciousness of the affected group (Ankersmit, 2002). They therefore become part of the group's social memory and thus can be passed on to future members of the group through the cultural systems of the group.

The application of Ankersmit's theory in the context of Xhosa society would explain how feelings of alienation, despair and hopelessness can emerge from being subjected to mass trauma. If we assume that historical trauma can handicap the population in terms of psychological development, then it is plausible to assume that the feelings of despair and hopelessness were experienced by the original group members who were subjected to the traumatic events firsthand, and through the collective memory and consciousness of the group those feelings were passed down to subsequent generations, especially in situations where the social consequences of that trauma have not yet been resolved. An example of this would be how the trauma of land dispossession during the frontier wars saw Xhosa-speaking people lose the bulk of their indigenous lands and resources to white settlers. We can assume that this loss caused feelings of despair, hopelessness and alienation in the original population that experienced that trauma. Not only did they lose access to resources for survival, but they lost a deeper connection to their ancestral heritage that is embedded in local landscapes. Although consequent generations were not present during the land wars, the feelings of despair have been passed down through the memory and consciousness of the group.

The trauma stemming from land dispossession has inevitably handicapped the population through systemic poverty, homelessness, and lack of economic participation (McLachlan, 2019). This can be attested by the recently passed Land Expropriation Act of 2025 through

the South African parliament that seeks to return land to the descendants of those whose land was forcefully taken. This Act was created with the idea in mind that the trauma of land dispossession has greatly handicapped the development of indigenous people throughout generations and has negatively affected the ways in which indigenous people relate to the world, especially because the systemic racism that resulted in the accumulation of wealth in the hands of the white minority population continues and has not yet been adequately resolved. South Africa is still one of the most unequal societies in the world.

Historical trauma response: understanding psychological suffering emanating from trauma

According to research, Post-Traumatic Stress Disorder (PTSD) is a form of historical trauma response that has implications for severe long-term impact on the health of those affected, such that individuals diagnosed with PTSD experience higher likelihoods of health disparities which can negatively affect quality of life (Schnurr & Green, 2004). A study found that trauma creates deep emotional scars that can seriously impede the interpersonal relationships of those affected (Brunello, Davidson, & Deahl, 2001). According to Sotero's model, "historical trauma theory is the embodiment of this sentiment" (Sotero, 2006, p. 95). Higher prevalence of disease can be observed in populations that have endured mass trauma (Mohatt, Thompson, Thai, & Tebes, 2014).

Additionally, literature reveals that people's responses to deliberate traumatization significantly differ from those caused by accident or forces of nature (Whitbeck, Adams, Hoyt, & Chen, 2004). According to Braveheart (2003), trauma that has been deliberately enacted on people produces a deep sense of alienation. This is because trauma that has happened naturally does not happen with the sinister intention to violate human dignity, whereas trauma that has been deliberately enacted happens with the sinister intention of causing harm and violating human dignity and human rights. Some researchers argue that premeditated violence disrupts our most fundamental ideas about justice, order and morality (Cardeña & Croyle, 2005) (Whitbeck, Adams, Hoyt, & Chen, 2004) (Kellerman, 2001).

Taking the notion of historical trauma response in mind, we can stipulate that trauma that has been inflicted deliberately greatly affects the victim's sense of reality because it disrupts their core understanding of human morality and decency. In South Africa the deliberate undermining of African identities through apartheid policies further exacerbated this erosion

of self-esteem and worthiness. This has the potential to significantly harm one's perception of themselves and their place in society, leading to self-harming behaviours such as addiction. Additionally, this can also cause other health issues such as anxiety, suicidal ideation, and depression, which are common symptoms of PTSD (Braveheart, 2003).

Sotero's conceptual framework of the transmission of trauma

Sotero (2006) describes historical trauma as a disease in the sense that it has modes of transmission. In her model, she argues that the mass trauma experience begins with the subjugation of a population by a dominant group either through war, violence, or cultural dispossession, thereby resulting in health disparities that can be passed down to subsequent generations. Essentially, historical trauma is a disease that can be inherited from generation to generation (Struthers & Lowe, 2003). The model below showcases the physical, psychological and social pathways linking historical trauma to disease prevalence and health disparities. The model suggests that historical trauma originates with the subjugation of a population by a dominant group which "enforces subjugation through various means including military force, national policies of genocide, ethnic cleansing, incarceration, and/or laws that prohibit freedom of movement, economic development, and cultural expression" (Sotero, 2006, p. 99)**.**

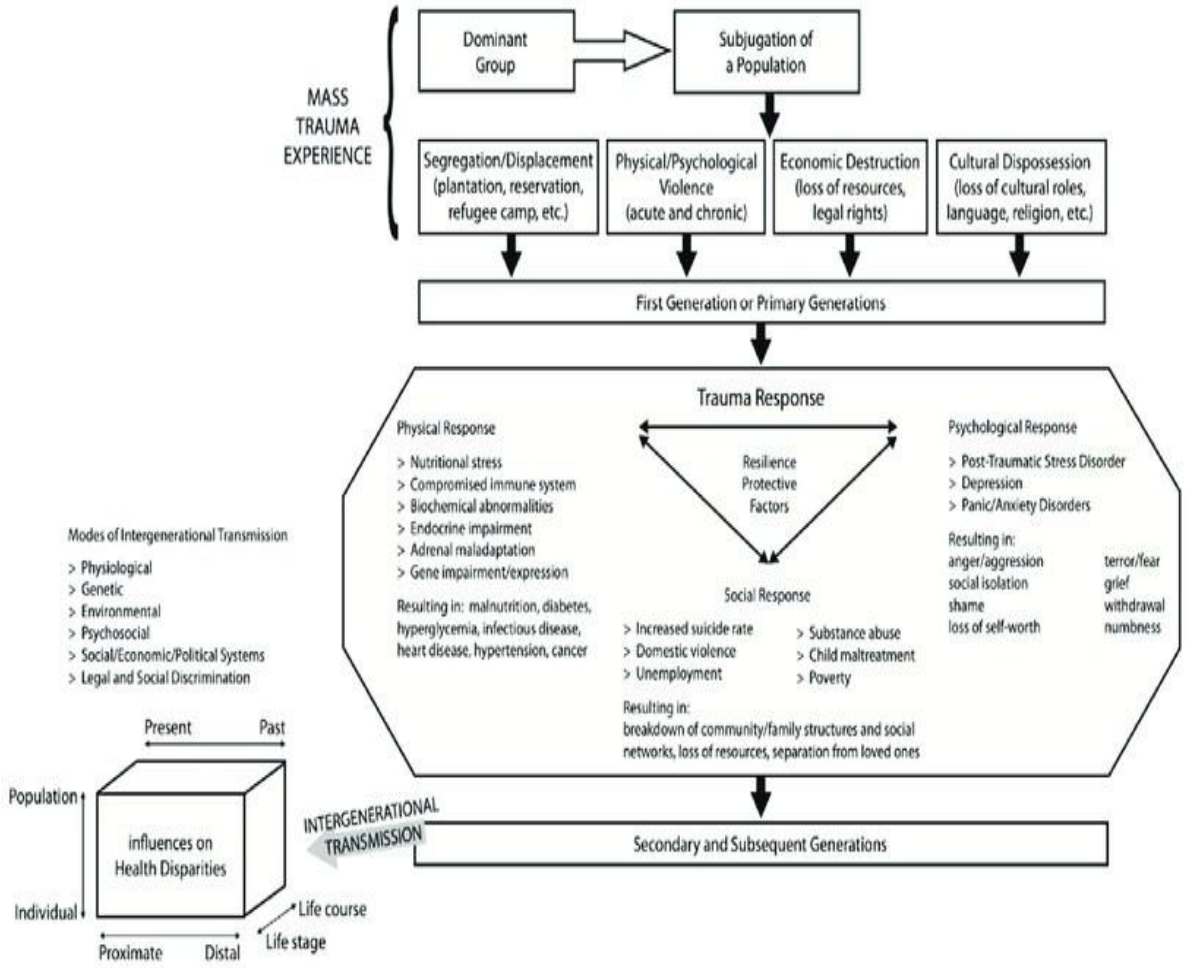

Figure 4: A diagram showcasing the historical trauma theory and the conceptual framework of the generational transmission of trauma (Sotero, 2006)**.**

In theory, this model can be used to analyse the effects of a historical event on the subjugated population and the pathway in which that trauma results in health disparities in subsequent generations. In the Xhosa context, if we try to analyse the historical trauma of the Betterment Planning policy as an example, we can start off with the domination exerted by the apartheid government, which in turn subjugated Xhosa-speaking people, which then led to mass displacement and loss of resources (land). The primary generation's trauma response to this would have been physical (stress), psychological (fear/grief) and social (poverty), resulting in the breakdown of community/family structures, social networks (ancestral relationships) and further loss of resources (culling of cattle). The modes of the intergenerational transmission of the trauma onto the secondary or subsequent generations would be psychosocial (alienation and despair), environmental (loss of arable lands for crops), economic (poverty) and political (loss of rights), resulting in health disparities. Although this model does not

provide a definite pathway for trauma transmission, it does offer a useful idea in terms of understanding the social pathways linking historical trauma to health disparities.

The intergenerational transmission of historical trauma

According to Sotero's model, traumatic events become "embedded in the collective, social memories of the population and thus the offspring of that population are taught to share in the ancestral pain of their people and may have strong feelings of unresolved grief, persecution and distrust" (Sotero, 2006, p. 100)**.** Additionally, secondary and subsequent generations also experience vicarious traumatization through the sharing of pain within the group (Braveheart, 1999) (Faimon, 2004) (Williams, Neighbors, & Jackson, 2003). Vicarious trauma was first identified in the 1980s (Figley, 1982). It is sometimes referred to as 'compassion fatigue' because it relates to the emotional and psychological anguish associated with being close to people who directly experienced severe mass trauma (Perlman & Saakvitne, 1995).

Symptoms of vicarious trauma can parallel those of PTSD and often include experiences of emotional numbness, avoidance, and persistent anxiety (Figley, 1996). Although intergenerational trauma is individually experienced, the trauma can span multiple generations such that contemporary members of the affected group may experience trauma-related symptoms without having been present for the original traumatizing event. An example of this would be the case observed amongst South Africans where the older generation who experienced the direct brunt of apartheid and the struggle for democracy seemingly pass on their generational traumas to their "born free" offspring (children, grandchildren and great-grandchildren). In essence, historical and intergenerational trauma are interlinked, but cannot be defined as the same trauma.

Furthermore, in the South African context, indigenous people have been marginalised by oppressive structures of colonialism and apartheid, including military invasion, violence, racial discrimination, poverty, ethnic cleansing and oppression of identity which in turn have undermined the psycho-spiritual ties to their knowledge systems, land, ancestors, and natural environments that may hold sacred spaces of healing. Scholars agree that when indigenous people are denied access to their knowledge and healing cosmologies then the psycho-spiritual health benefits that come with developing those relationships between people, their ancestors and the natural environment diminishes, resulting in health disparities (Mokgobi, 2014). Hence then, due to the historical and generational nature of the propagation of trauma

amongst the indigenous populations of South Africa, an effective approach for understanding the impacts of trauma on the health status of Xhosa-speaking people would be to first identify what the indigenous understandings of trauma are amongst this population and subsequently how these understandings influence health seeking behaviour.

Limitations of historical trauma theory

Sotero (2006) herself argues that historical trauma theory is a relatively new concept and hence is still being investigated from many disciplines, hence it is challenging to make concrete conclusions using this theory. Additionally, Sotero argues that the theory of post-traumatic growth has been criticized for concentrating on the growth that happens to affect groups following a singular traumatic experience whilst neglecting the growth that has occurred from multiple traumatic events that take place over time. Research has shown that resilience builds over time because affected groups experience collective trauma as a cumulative and continuous occurrence instead of a singular event.

Lester (2013) argues that western "discourses about trauma discursively construct it as having an identifiable beginning, middle, and end" and in doing so neglect the continuing systemic oppression that affected groups experience daily (Lester, 2013, p. 755). For this reason, historical trauma has a different scale for such populations because for them there is nothing 'post' about trauma, it is an ongoing experience that affects daily life (Ginwright, 2015). In the context of Xhosa-speaking people, who have sacred attributes that link community experience to identity, it is challenging to identify the exact mechanisms by which resilience occurs following mass trauma since group experience is so closely tied with ideas of self and humanity's place in the universe. Since traumatic experiences accumulate one on top of the other, it is a challenge to delineate from which exact traumatic event resilience has been fostered. It could be that resilience is a continuous attribute that has been built over time as new generations apply innovative methods to overcome their suffering, grief and loss in their unique social and environmental contexts.

An example of this in the Xhosa context would be the *ukulanda amaxhego* ritual, which according to de Wet and Mgujulwa (2020) emerged about 40 years ago as a response to the trauma of displacement. The ritual emerged as an innovative method to overcome the grief of being separated from the older cluster of ancestors and showcases how Xhosa-speaking

people are continuously able to come up with new ways to manage historical trauma within their unique environmental contexts.

The theoretical framing of memory and silence

Veena Das (2003) highlights the challenges that come with describing the impact of violence on collective trauma by arguing that "terms such as riots, pogroms, and genocide reflect the points at which the body of language becomes one with the body of the world" (Das, Trauma and testimony: Implications for political community, 2003, p. 293). She brings attention to the idea that perhaps focusing too much on naming the violence actually "constitutes a performative utterance" (ibid). To anchor this idea, she gives the example of how following the violence in Gujarat, India in March 2002, then Prime Minister Atal Bihari Vajpayee, cautioned the parliament to not use the word 'genocide' to describe the violence as such expressions could ruin India's image internationally. This scenario showcases the fragility of human understandings of what constitutes communal violence, which can result in a situation where the obstacles to recovery can include a series of denials about the nature of the violence itself.

Das advises that one way to engage with this complexity is to acknowledge that it is central to the human experience that "when faced with the kind of trauma that violence visits on us, we have to be engaged in decisions that shape the way that we come to understand our place in the world" (Das, 2003, p. 297). In her work, Das (2010) makes mention of Fassin and Rechtman (2009) who describe the "morality of trauma" as being a conclusive moral category that authenticates the suffering of trauma victims. This way, mass trauma experienced by oppressed groups can be recognized, thus offering support for those affected. This recognition can be applied as a resource for making political claims such as reparations or for seeking asylum. This way of looking at mass trauma prioritises the social and political consequences of historical trauma on affected populations, thus shifting perceptions of self-recovery from the induvial to the collective.

In the African context, Mbembe (2002) cautions that the lack of self-representation in the process of self-recovery can itself be described as a form of nativism which can lead to history being viewed from a lens of victimhood over subjecthood. Much like how in the context of the grey zone in the memory of the Atlantic slave trade between black Americans and continental Africans, a silence of guilt and shame is possible when it comes to

documenting history. In such instances, writing the self becomes a process of exploring history in both the literal and figurative sense, thus creating space for self-creation. Das argues that this process forms an essential part in rejecting notions of the past that are located in a linear conception of time. The process of self-creation can possibly strengthen collective resilience.

3.3 Resilience and Post-Traumatic Growth as measurements of healing

In principle, resilience refers to a people's persistence to survive in the face of change, and their ability to adjust innovatively, using cultural resources, into more desirable conditions when required, without compromising their identity (Collier, 2016). The retention of cultural identity is the defining feature of a resilient society. Although similar, resilience and post-traumatic growth (PTG) are not the same concepts. PTG is a theory that attempts to explain the pathways by which psychological transformation can take place to an individual following a traumatic event (Collier, 2016). Hence then, post-traumatic growth can be used as a measure of resilience, and together both can be used as a measure of the healing that has taken place within the affected group.

An integrated Historical Trauma and Post-traumatic Growth conceptual framework

Ortega-Williams, Beltran, Schultz, Henderson, Colon & Teyra (2021) present five mass group-level domains in the HT-PTG conceptual framework. These include "collective strength, collective spiritual change, relating to ancestors and culture, new possibilities for collective destiny, and appreciation for our lives" (Ortega-Williams, et al., 2021, p. 220). Features of collective strength include social cohesion and a willingness for community members to assist one other despite the ongoing challenges of discrimination. This means that in the context of historical trauma, the collective strength of the group in the face of adversity trumps the individual efforts to counteract the trauma. Thus, the collective efforts of the group matter in terms of overcoming the systemic violence that stems from mass trauma (Tedeschi & Calhoun, 2004).

An example of this in the South African context would be the fight against the oppressive apartheid government. The liberation struggle was a group effort that united black people across the country in the fight for freedom. In that case, the efforts of individuals on their own would not have been sufficient to overcome the trauma, but instead victory was achieved

by the efforts of the collective. Additionally, this means to overcome the aftereffects of apartheid, which are still being felt today, will also require collective strength and effort.

Furthermore, an integrated historical trauma and post-traumatic growth framework considers the pathways in which overcoming trauma leads to growth within the affected population. In the context of apartheid, the trauma was multifaceted and included economic oppression as black people were exploited for labour in the system that served to accumulate wealth in the hands of the oppressors. The anthropology of primitive accumulation illustrates that "colonization, enslavement, exploited labour, and extraction of natural resources were means to hoard and accumulate wealth" (Ortega-Williams, et al., 2021, p. 229). In the South African context, primitive accumulation entailed "the state driven process whereby 'unlimited' supplies of cheap labour for capitalist producers were created through the dispossession of African rural communities" (Arrighi, Aschoff, & Scully, 2010, p. 421). The architects of apartheid did not intend for black people to overcome the traumatic conditions they were subjected to as to do so would diminish the accumulation of wealth for the oppressors. This is because primitive accumulation in the apartheid context included the suppression of human rights and the commodification of black bodies, creating a situation where the black body was a resource that could be exploited for capitalist means (Thakholi, 2023). To overcome the trauma of apartheid, black people in the liberation movement had to also attempt to overcome the commodification of black bodies, meaning that the resistance had to be two-fold; external and internal. Thus, the collective strength observed in the overcoming of historical trauma in South Africa is a resistance mechanism used to prevent complete eradication in the face of capitalism's expansion through the commodification of the indigenous black body.

Indigenous understandings of community and collective consciousness as resilience

Defining resilience presents a problem because it is difficult to find a universal definition (Luthar et al., 2000). According to Windle, Bennett & Noyes (2011), the concept of resilience has received increasing interest from policy and practice due to "its potential influence on health, well-being and quality of life and how people respond to the various challenges of the ageing process" (Windle et al., 2011, p. 1). This shift has seen resilience been identified as a key important factor in determining lifelong health and well-being. Some scholars opt to define resilience as a "dynamic process encompassing positive adaptation within the context of significant adversity" (Luthar et al., 2000, p. 543). Masten (2007) states that resilience is

broad and can refer to a system's ability to recover from considerable obstacles. Current conceptualisations of resilience pay attention to individual relationships but ignore the complexities of group trauma and collective consciousness in the building of resilience.

In her PhD thesis, Ohajunwa (2019) argues that resilience is a social ecological construct, and that people learn how to be resilient in collective through community. Therefore, to build resilience, communities that have been affected by struggle need to be supported systemically. She suggests that the approaches used need to take into consideration culturally relevant ways of fostering healthy relationships and support systems that is grounded in ideas of identity and spirituality. She gives the example of children from the kwaBomvana Xhosa-speaking region of the Eastern Cape where the migrant labour system resulted in men leaving their families behind in search of work in the urban areas. She describes how young children were left without the adequate leadership and mentorship that is needed to help them develop a healthy sense of identity, which in turn contributed to various social ills, including drug and alcohol abuse amongst these young people.

In this community, resilience was built over time through the integration of indigenous cosmologies in the conceptualization of community wellbeing. Bomvana society focuses heavily on fostering community bonds as part of maintaining wellbeing, so in this community children are raised to uphold Ubuntu as a pedagogy for maintaining healthy relationships and wellbeing. Children are taught the fundamental basics of sharing with each other and by seeing each other as members of a bigger human family, regardless of which clan one comes from. This human connectedness is conceptualized as meaning that a child born in Bomvana belongs kwaBomvana society. This spirit of unity and Ubuntu contributes to building self-esteem and therefore helps to strengthen the bonds on which Bomvama society is built, thereby maintaining wellbeing. This sense of community unity helps to build a sense of self-worth, which can build resilience for vulnerable youth, especially those whose family structures were negatively affected by the migrant labour system. So, according to Ohajunwa (2019), it is necessary to be aware of the complexity of such factors at play when working with resilience in previously disadvantaged populations such as the amaXhosa.

3.4 The anthropology of memory: collective trauma and memory

Approaches to the topic of historical trauma and cultural trauma vary, as some authors argue that the two fields differ significantly, whilst some argue that they intersect in their

theorizations and methods but do not actually converge (Kennedy, 2020). Some have argued that the two fields inform interdisciplinary research for the premise that "the act of remembering is always in and of the present" (Huyssen 2003 in Kennedy 2020 p. 54). Critiques of trauma theory highlight that the field focuses too much on portraying trauma as something that has a definite beginning, middle and end, and in the process neglects the cultural aspects of memory. While there is an acknowledgement that trauma theory is present in studies of cultural memory, the concepts of cultural memory cannot be fully absorbed into trauma theory but rather can supplement it (Kennedy, 2020).

As a definition, "cultural memory refers to the ways in which acts of remembering and commemorating past events in the present are mediated through cultural forms and cultural media" (Kennedy, 2020, p. 60). This means that human beings do not experience memory in a vacuum, but rather human memory is experienced through symbols and shared meanings within the cultural contexts those signs and symbols have developed, hence the 'cultural' element of memory. Culture can therefore shape both personal and collective memory through the culturally relevant symbols of the group that evoke emotions. Within the South African context, an example of this would be how memories of past violence such as apartheid are shared through storytelling and music (such as struggle songs), so that younger generations who were not present during apartheid share in the collective memory of the event through the stories that have been passed down from the primary generations that lived through that experience. In this way, cultural symbols allow people who have no direct experience of the traumatic event to "acquire memories and affectively invest in events that they have never directly or personally experienced" (ibid).

According to Assmann (2008) "memory enables us to live in groups and communities and living in groups and communities enables us to build a memory", emphasizing the fact that memory can serve as a function of social life (Assmann, 2008, p. 109). Hence then, the anthropology of memory serves to highlight these dynamics by taking into consideration the oral, visual and ritual elements that contribute to how the group's collective memory of the past and present is reproduced and sustained (Linke, 2015). Ritual also provides an anchor to the past. The anthropology of collective memory also considers the notion that there may be noninstitutionalized knowledge which might be integrated into the construction of memory by a certain cultural group, thereby showcasing the group's resistance to the "colonization of time" that often contributes to the power dynamics of how history is written and told (Linke,

2015, p. 181). In this way, the memory of individuals and the collective memory of the group interact with each other as each person might share their own narrative of the past, thus resulting in different versions of the past. All these versions work together within the collective consciousness of the group as new ways of remembering are reconstructed (ibid).

Linke (2015) further argues that throughout history, colonial conquest served to portray history as a means of classification that set European civilization as the standard from which other civilizations must be compared. This resulted in an emergence of early anthropologists who sought to use comparative methods to studying other people's experiences, often stripping them of their meaning which are bound in cultural context. The dawn of the 20th century saw a paradigm shift where anthropologists started to study non-Western societies through firsthand observation in the field, ushering a wave of descriptive analysis in the construction of experience through ethnography. However, theorists like Levi-Strauss, "advocated for a humanist-philosophical approach that examined the deeper systemic framework whereby a people lived, signified, and imagined their own historical situatedness in cultural terms" (Linke, 2020, p. 182). Evans-Pritchard (1962)'s critique of ethnography was that it served to highlight a dominant culture's perception of what constitutes history and memory's role in the process of understanding past and present. He suggested that memory is embedded in the cultural ritual and narrative practices of the group. In the process of studying indigenous people's collective memory, it is important to consider the influence of mythical/sacred time on how bodies and magic interact in the process of remembering traumatic events. This is because indigenous people may exhibit indigenous memory forms that do not neatly fit the Western idea of linear time (Evans-Pritchard, 1962).

Furthermore, Hirschberger (2018) argues that collective trauma transforms into collective memory through the process of 'meaning-making', and therefore "collective memory of trauma is different from individual memory because collective memory persists beyond the lives of the direct survivors of the events, and is remembered by group members that may be far removed from the traumatic events in time and space" (Hirschberger, 2018, p. 1). This means that the primary survivors of a traumatic experience may have a different collection of events as opposed to their descendants who did not experience the event firsthand, thus resulting in a situation where the construction of the traumatic events may take different forms with each subsequent generation.

He further argues that over time, "collective trauma becomes the epicentre of group identity, and the lens through which group members understand their social environment" (ibid). When this happens, the trauma becomes part of the collective identity of the group such that this keeps the memory of the trauma alive in the cultural practices of the group. This can thus give rise to the development of methods of meaning-making which are grounded in the indigenous understandings and interpretations of the group, which themselves are grounded in the group's ontology. An example of this as observed within the Xhosa context is the emergence of the ritual of *ukulanda amaxhego* as described by de Wet & Mgulujwa (2020), where the trauma of displacement has become entrenched in the collective memory of the group, and as such methods of reconciling this trauma have been integrated into the collective consciousness of the group through the adoption of innovative rituals. Experiences from past generations can inform future generations on how to identify trauma, which in turn may inform culturally relevant approaches to dealing with that trauma thereby contributing to the group's resilience.

Trauma theory and spirituality: healing landscapes

The anthropology of therapeutic landscapes seeks to understand how the relationship between land, culture and health can make an environment therapeutic (Marques, McIntosh, & Webber, 2021). Gesler (1992) was the first anthropologist to coin the term, particularly to refer to places in the natural environment that serve to enhance wellbeing for those whose subjective experience of the space brings them healing. Gesler's conceptualization of health in this regard was not focused on biomedical concepts of physical illness and healing, but rather focused on the spiritual meanings of wellbeing, thereby linking place and healing by claiming that "healing process works itself out in places (or situations, locales, settings and milieus)" (Gesler, 1992, p. 743). This approach served to highlight the importance of studying the natural environment from an emic perspective to understand the cultural meanings of landscapes in terms of embodiment.

Ingold (2002) added to this argument by critiquing the Cartesian separation of the human being from nature by observing that the two entities are not mutually exclusive because in essence "culture is man's means of adaptation to the environment" (Ingold, 2002, p. 39). Fundamentally, the concept of therapeutic landscapes highlights the role of human heritage and ritual practice in the preservation of cultural memory, thereby challenging the boundary between geography, culture and health (Winchester & McGrath, 2017). Additionally,

Marques, McIntosh, & Webber (2021) contend that the use of sacred spaces for healing does not mean that ritual is unflexible or stuck in stone, rather indigenous people who have been forcefully removed from their original lands can reconstruct ritual to fit their new environmental contexts.

In the Xhosa-speaking context, this phenomenon is identified by Canham (2023) in what he calls 'Mpondo Theory'. In this theory, Canham positions the black indigenous identity as one that is constantly shifting and adapting, innovative in its attempt to renew and revitalize itself in the face of adversity. He claims that to be an African is to be both black and indigenous, highlighting the complexities of existing in a body that is "enfolded within the natural world, the spiritual, and systemic realms" (Canham, 2023, p. 5). Canham draws from the understanding that for Xhosa-speaking people (whom the Mpondo are a part of), being a human being includes both the seen and the unseen, the empirical and the sacred, the land and the oceanic which all intersect to create a portrait of indigenous life that is full of meaning and yet opaque. He therefore defines Mpondo Theory as "a way of seeing, knowing, being, and living with and against sedimented devastation" (Canham, 2023, p. 6).

Mpondo Theory is based on the concept of *ukwakumkhanya*, a way of seeing that sheds light onto what is unseen and casts shade on what is seen thereby creating a new way of looking at indigenous life that is queer and askance. The benefit of this way of seeing is that it validates the experiences (and knowledge) of Xhosa-speaking people that may otherwise be disregarded as illegitimate by dominant narratives. As he explains, "*ukwakumkanya* is to attend from a place of survival that is coded in the body and intergenerational knowledges" (ibid). This concept legitimizes the inclusion of ancestors in the generation of knowledge by asserting that the indigenous body creates knowledge in both its physical and spiritual dimensions, through its interactions with landscapes and death, thus creating a bridge between the past (ancestral knowledge) and the present (innovation) thereby challenging colonial discourses about the nature of history and how it is remembered.

According to Canham, Mpondo Theory presents the idea that indigenous Xhosa life is a shifting phenomenon between life and death such that "the dead hover among us in the landscape, in our psyches and rituals" (Canham, 2023, p. 23). He makes the argument that the black indigenous body, and the home in which it is embedded, are equally a part of the Xhosa landscape as the oceans, rivers, spirits and graves that cover the land. Bank & Sharpley (2022) corroborate this claim by stating that the rural Xhosa-speaking home acts as a place of

spiritual security and as a result, acts as an anchor of resistance against dehumanizing capitalism and the anti-blackness of the legacy of oppression. The indigenous Xhosa home is a therapeutic landscape because it is the place where healing happens, where people go to find peace and healing with the help of the ancestral realm and natural environment. The indigenous Xhosa home, along with the natural environment it is nestled in, is a centre of becoming through forging of family and cultural identity that is submerged in the past but also looks to embrace new identities that are produced through life in a contemporary landscape. Likewise, Halbwachs (1980) asserts that "the image of a place conjures up thoughts about an activity of the group associated with that place", further emphasizing the role of space in cultural memory, and therefore resilience (Halbwachs, 1980, p. 7).

In terms of forging cultural identity from the amalgamation of past and present, Solomon (1987) asserts that ancestral spirits form part of the Xhosa healing landscape in the sense that death does not mark the end of one's life but rather extends it beyond the grave as the indigenous body is forever part of the landscape in life and in death. She argues that it is in death that ancestors are remembered, along with their pain and suffering, such that death rituals are therapeutic which presents new opportunities for healing and the alleviation of grief for the living kin. By positioning indigenous Xhosa ways of knowing within the healing landscapes from whence they emerge, we can go beyond seeing landscape as geography and begin to broaden the scope of the concept of native land, oceans and rivers as sacred spaces of emotional retreat and healing for indigenous peoples. As Canham's Mpondo theory stipulates, the natural environment is a healing shrine for Xhosa-speaking people.

3.5 The role of Xhosa spirituality in healing trauma

Xhosa spirituality is deeply rooted in the concept of *izinyanya*. This term refers to both the ancestral spirits one is descended from as well as the spirits of the land (Cocks, Dold, & Vetter, 2012). Spirits of the deceased play a key role in the conceptualization of wellbeing within the Xhosa cultural framework such that they are regarded as minor deities. In her Master's thesis, Mlonyeni (2019) explored the cultural understandings of traumatic stress among Xhosa-speaking traditional healers in the Eastern Cape province. She found that Xhosa-speaking people utilize indigenous coping strategies following traumatic exposure. These strategies are deeply rooted in ancestral communication and ritual practice. They are described in the following sections.

Trauma as a sign of ancestral anger

Mlonyeni explains that traditional healers understand a traumatic event as "a reflection of a fault in that person's spiritual standing" (Mlonyeni, 2019, p. 30). In this context, trauma is understood as something that does not happen randomly but reflects a neglected relationship with one's ancestors. Hence, the occurrence of a traumatic event is understood to be the result of ancestral anger and is thus seen as punishment. In Xhosa cosmology, wellbeing is understood to be a state of stable relationships between the self and one's ancestors, including relationships with one's family, community and the environment (Mji, 2013). Maintaining stable relationships with the ancestors provides protection from harm and misfortune. The protection one receives from their ancestors is referred to as *ukukhusela* and encompasses the ways in which relationships between self, personhood and ubuntu inform agency (Hobongwana-Duley, 2015).

Meveni (2014) refers to the trauma emanating from lack of ancestral protection as *inkathazo.* This term directly translates to 'trouble' in the English language and describes the misfortunes that occur when rituals which are meant to maintain ancestral connections are neglected or abandoned. In my experience as a traditional healer, these rituals include offerings of livestock and beer known as *umnikelo*. When the ancestors do not receive *umnikelo*, they get angry and as a result rescind their protection. There are multiple ways in which the ancestors may request *umnikelo*, such as through dreams or by sending a sacred animal to the homestead. The arrival of this sacred animal is known as *indwendwe* (visitor) and requires a consultation with a diviner to determine the reason why the ancestors have sent the visitor. As a diviner, I have performed countless of these divinations and in my experience, the ancestors send *indwendwe* to request *umnikelo* so that the bonds between them and their kin can be strengthened thereby assuring protection from harm.

In his exploration of the dynamics of *inkathazo*, Maveni defines it as an "affliction which is reputedly caused by the ancestors" (Meveni, 2014, p. 22). This affliction is a result of the ancestors rescinding their protection and can potentially lead to a larger phenomenon known as *ilishwa*. described as a state of despair and helplessness. People who are experiencing *ilishwa* describe it as feeling abandoned by their ancestors (ibid). To remedy the situation, a revival of rituals known as *amasiko* is undertaken to facilitate the mending of broken relationships between the ancestors and their kin who are experiencing the *ilishwa*. The *amasiko* are a set of rituals and customs that are usually specific to a clan or lineage although

they may be similarity among Xhosa-speaking clans (Hobongwana-Duley, 2015). Revival of *amasiko* might include offering of a cow and traditional beer where members of the kin group are expected to attend and participate. In my experience as a traditional healer, this revival known culturally as *ukuvuselela amasiko*, is usually performed after a member of the family had received a dream or an *indwendwe* had visited the family homestead. After the broken relationship between the ancestors and their kin group is repaired, the *ilishwa* is lifted and ancestral protection is restored. This indigenous Xhosa conceptualization of trauma management is the focus of my research and will be discussed in further detail in Chapters 5 and 6 of this thesis.

Witchcraft as a source of trauma

Mlonyeni (2019) describes witchcraft as a source of trauma in the sense that it creates a disturbance in the relationship with the self by exposing one to spiritual vulnerability. Since in the Xhosa health model a stable relationship with the self is a determinant of health, witchcraft undermines wellbeing. The disturbance in the relationship with the self, caused by witchcraft can lead to trauma. According to Mlonyeni, "traumatic events are likely to occur in your life as a result of being vulnerable to evil spirits" (Mlonyeni, 2019, pg. 33). To prevent such trauma from occurring, one must protect themselves by using protective medicine known as *muthi*. Failure to do so results in a phenomenon known as *ukuthakathwa* (bewitchment). When this happens, one will be exposed to misfortunes and even physical illness. To protect oneself from bewitchment, a ritual known as *ukuqiniswa* ("to strengthen") needs to be performed (ibid). This ritual is performed by a traditional healer and includes using protective herbs and amulets to cast protection over the patient.

In my experience as a healer, I perform a series of rituals in the process of *ukuqinisa* for the patient. I utilize a combination of herbs and animal fat to make the protection medicine. Firstly, I make small cuts into the patient's skin and apply *muthi* on the cut so that it can be absorbed into the bloodstream. I make cuts on both wrists, below the belly button, on the neck, above the knees and on both ankles. The patient must allow the medicine to dry onto the skin overnight and can only bathe the next day. This is done to make sure that the medicine penetrates the skin. This process is known as *ukuqaphula*. In addition to *ukuqaphula*, the patient undergoes a purification regimen that includes *ukufutha* (steaming), *ukugabha* (purging) and *ukucima* (enema) for a period of seven days. All these steps combined comprise the *ukuqinisa* ritual.

Xhosa strategies for diagnosing trauma symptoms

Mlonyeni asserts that "linguistically AmaXhosa do not differentiate between being shocked and being traumatised; it is all shock" (Mlonyeni, 2019, pg. 35). The Xhosa term for shock is *ukothuka*, hence trauma is understood to be a state of *ukothuka*. Hypervigilance, nightmares, distrust and anxiety are some of the symptoms that are used to diagnose trauma within the Xhosa context (ibid). If these symptoms occur without a physical trigger such as physical violence, then the cause of the trauma is diagnosed to be witchcraft. The modes of action of the bewitchment may include the onset of intrusive nightmares that make the patient anxious and distrusting of their environment. In cases where there has been a physical trigger such as bodily pain that is untreatable with painkillers, then the diagnosis will also be witchcraft, and the patient will have to undergo a series of protective rituals to purge the evil spirits (ibid). Meveni (2014) refers to these evil spirits as *amafufunyana* which are sent to the victim because of jealousy from others. These "others" might include family, friends or neighbors but rarely strangers. This means that witchcraft is understood to be a relational phenomenon. Ngubane (1977) describes witchcraft as resulting from a disturbance in the social relationships on which indigenous South African society is built.

However, anxiety can also be attributed to a disturbance in ancestral relationships. In such cases, anxiety is referred to as *umbilini* (Mlonyeni, 2019, pg. 38). In this context, anxiety is understood to be a result of a hyperactive intuition stemming from the ancestors trying to communicate their unhappiness. A diviner might recommend that the patient induce dreams so that the ancestors can reveal the problem through dream communication. *Ukuphahla* is the process of talking to one's ancestors in the family kraal or shrine where ancestral communication is facilitated within the homestead (Mlisa, 2009). Offerings of alcohol and tobacco are usually made to the ancestors in the shrine. The incubation of dreams includes using *ubulawu*, a dream-inducing plant, which the patient ingests before sleep. Failure to communicate with the ancestors to reveal the cause of the *umbilini* might result in the patient experiencing misfortune and physical pain.

This understanding of trauma conceptualizes pain as spiritual violence. As such, the treatment for trauma focuses mainly on healing the spiritual elements of a person's life. This might differ from the biomedical ways of diagnosing and treating trauma as a psychological illness. However, Mlonyeni asserts that some contemporary traditional healers are open to recommending biomedical interventions such as trauma counselling to their patients if they

have experienced physical trauma such as rape. In such cases, the patient would use a combination of biomedical and indigenous treatments. This medical pluralism is something that I have utilized in the management of my own trauma as I underwent psychiatric treatment whilst also utilizing indigenous medicine.

Conceptualizing historical and intergenerational trauma within an indigenous Xhosa context

Canham (2023) emphasize the need to conceptualize historical trauma within a Xhosa framework as doing so would validate the experiences of Xhosa-speaking people. Due to the complex nature of the historical trauma that Xhosa-speaking people have endured, it is crucial to consider the role of indigenous healing cosmologies in diagnosing and treating trauma-related illness. This requires acknowledging the interaction of individual experiences with wider socio-cultural factors such as relationships with others, ancestors and the natural environment. Additionally, it requires acknowledging the role of historical events and social injustices in disturbing the crucial community dynamics on which wellbeing is dependent on. Conceptualizing historical trauma in this manner necessitates moving beyond an individualistic perspective that portrays trauma as having a beginning, a middle and an end.

Mpondo Theory is worthy of considering as a conceptual framework because it conceptualizes the historical trauma experienced by Xhosa-speaking people by grounding it in the lived experiences and cultural context of the amaXhosa as a collective. The value of doing so ensures that explorations of the impact of trauma on Xhosa-speaking people consider the dynamic interplay of socio-cultural, eco-cultural and political forces in shaping interpretations of trauma experience. Placing emphasis on relational ontology in this manner is crucial for addressing historical trauma within this population (Bradbury, 2024). My study is unique in the sense that it attempts to explore the impact of trauma on Xhosa-speaking people by placing an emphasis on the relational ontology on which Xhosa indigenous healing cosmologies are based.

3.6 Conclusion

This chapter served to discuss the theoretical and conceptual frameworks that underpin this study. The complexities of understanding historical trauma theory were explored in relation to the trauma that has occurred in the South African context. Additionally, issues of resilience

and the challenges of defining it were explored with the intention of highlighting the difficulty of applying trauma theory across diverse populations which have their own social contexts. A critique of post traumatic growth theory was given to further highlight the challenges of applying trauma theory on populations with distinct cultural and social histories. Finally, the concepts that underpin the understanding of trauma within the Xhosa cultural context were analysed to emphasize the need for the inclusion of indigenous healing cosmologies in the management of trauma among Xhosa-speaking people. The following chapter explores literature on the use of indigenous healing cosmologies in the management of historical and intergenerational trauma in other parts of the world that have faced similar historical injustices with South Africa, such as Canada, the USA, New Zealand and Australia.

CHAPTER 4: The use of indigenous knowledge and healing cosmologies in the management of trauma

4.1 Introduction

Thongo lam (My dream guide),

Ndilawulele ithongo lam (Explain to me my dream).

Andizenzanga, ndenziwa ngabalele (I do it because of the ancestors)

Kubuhlungu ukugula (Illness is painful)

I received this song prior to my initiation to become an *iTola*. For weeks, I had been experiencing vivid dreams about being taken under water by the ancestors. In one of the dreams, an older male ancestor, wearing a white lab coat, told me that in the event that I should be taken under water my family must offer a white goat to the spirits of the water in exchange for my safe return. He explained that the journey I am about to undertake requires a lot of dedication to dream work in the sense that I would receive my training through dreams. He went on to further explain that unlike the training of *amagqirha*, the *amatola* to do not undergo *ukuthwasa* through a trainer but are trained by the ancestors directly. This training happens via dreams. As an *itola* who specializes in trauma management, I receive guidance about how to heal trauma from my ancestors. They communicate this information through dreams, which I then apply in the waking world when I am treating patients.

It was these personal experiences with dreaming that sparked my interest in studying the use of dreams in trauma healing from an anthropological perspective. The anthropology of dreaming (which is discussed in further detail in Chapter 4), explores how human beings interpret and utilize dreams within their cultural contexts. Doing so is valuable because it allows for anthropologists to examine how cultural practices shape the experience and interpretation of dreams. In trauma management, this approach has proven to be useful because as a healing tool, dreams can offer a space to process traumatic experiences. In addition to dreams, indigenous cultures around the world value ritual and ancestral communication as part of the healing cosmologies used to heal trauma. These cosmologies provide a culturally relevant framework for addressing trauma by emphasizing the restoration of balanced relationships between individuals, their families, communities, ancestors and

natural environments. Healing cosmologies are particularly useful for addressing the impact of historical trauma on affected communities because they recognize the spiritual dimensions of traumatic experience at both the individual and group level. The approaches offered by these cosmologies have proven to be useful when used in conjunction with biomedical models in trauma-informed care.

Studies have shown that indigenous communities that have experienced mass trauma such as colonialism, war and ethnocide experience health disparities that affect their ability to live healthy lives. The impact of mass trauma on affected families and communities can be passed on to succeeding generations through the collective memory of the population (Sotero, 2006). Researchers who study these populations have found that the inclusion of indigenous healing cosmologies in the management of such trauma can have a positive impact on healing (Braveheart & DeBruyn, 1998) (Brown-Rice, 2013) (Drožđek & Wilson, 2007) (Fast & Collin-Vezina, 2010). In this chapter, research that has been conducted in Canada, USA, Australia and New Zealand that highlights the historical trauma that has occurred in each country and the impacts it has had on the health status of the affected groups will be explored. Additionally, the use of indigenous knowledge in the management of trauma in these populations will be examined. A historical overview of the trauma in South Africa has already been highlighted in chapter 2 and therefore will not be repeated in this chapter. Instead, this chapter will attempt to examine the gaps in knowledge that present a challenge in historical trauma studies in the South African context.

4.2 Canada

Much like South Africa, Canada has faced colonialism, war, genocide, loss of land and systemic racism that has negatively affected its indigenous population from generation to generation. In Canada, the term ‘indigenous people’ refers to the people who identify as the First Nations, the Inuit, and the Métis peoples (LOC, 2024), and research shows that colonialism and the oppression that followed it has resulted in cycles of intergenerational trauma amongst these indigenous groups, leading to major health issues (Ardino, 2014) (O'Neill, Fraser, Kitchenham, & McDonald, 2018) (Sinclair, 2016) (Bombay, Matheson, & Anisman, 2014) (Tam, 2015) (Gone, et al., 2019) (Kaspar, 2014) (Feir, 2016)**.** One of the major sources of trauma has been identified by researchers to be the Indian Residential School system, which forcefully removed indigenous children from their homes and families and placed them in Christianized schools where they were taught European value systems

and culture as a means of detaching them from their indigenous heritage (Hackett, Feeny, & Tompa, 2016). According to research, not only were these children forced to abandon their cultural identities, but they were also subjected to mistreatment and abuse (Kim, 2019). The Canadian Truth and Reconciliation Commission, which itself was mirrored after the South African TRC, highlighted how this trauma led to the accumulation of illness that has been passed down intergenerationally within the affected communities and suggested recommendations for the advancement of indigenous people in Canada, and some of those recommendations included the development of culturally-informed trauma practices that serve to address the impacts of historical trauma on indigenous people (Toombs, Lund, Mushquash, & Mushquash, 2023).

Literature shows that amongst the indigenous groups of Canada, there is a deep understanding of the role of collective consciousness in the management of trauma-related illness, and researchers have investigated how this group knowledge and the cultural systems it is embedded in can be integrated into trauma practice (Ardino, 2014). The idea is that since mass trauma is experienced at both the individual and the collective levels, then collective consciousness can be utilized to address some of the issues that are faced by the affected group because these traumatic historical events resulted in "intolerable, unresolved and cumulative stress and grief experienced by communities and nations became translated, in time, into a collective experience of cultural disruption and a collective memory of powerlessness and loss" (Wesley-Esquimaux & Smolewski, 2004, p. 5).

In their efforts to highlight the multiple layers the process of colonization and historical trauma has had on the lives of indigenous people in Canada, Wesley-Esquimaux & Smolewski (2004) identified five key areas of impact being 1) physical, through the introduction of foreign disease to the population; 2) economic, which violated indigenous people's rights to land; 3) cultural, which undermined indigenous cultural values through the introduction of Christianity; 4) social, through the forceful removal of indigenous people from their lands and 5) psychological through subjugating and marginalizing indigenous people into poverty. These 5 areas of impact are also reflected in the colonial experience of South African indigenous peoples, through the forceful relocation of indigenous South Africans into poverty-stricken homelands that had little opportunities for economic empowerment, and through the introduction of Christianity that undermined indigenous

beliefs systems. From the descriptions of the mass trauma that occurred in Canada, the overlap with the South African context becomes apparent.

Additionally. in their study of trauma informed practice, George, Newton & Legacy (2024) state that key question that should be asked when determining the impact of mass trauma on indigenous people is by moving from the question "what's wrong with you?" to "what has happened to you?". In this way the principles of trauma informed care can connect the past and the present, thereby highlighting the complexity of trauma experience. The study identified key historical events that accumulated into mass trauma for indigenous people in Canada such as forced relocation from traditional lands, the Indian Act of 1876 that legislated the formation of the Indian reserves, the residential school system, the Sixties Scoop (forced adoption of indigenous children), and the 'Indian Hospitals' health care system that segregated indigenous people from the rest on the population in terms of healthcare access. The authors argue that the compounded trauma has manifested in mental health issues and addiction (George, Newton, & Legacy, 2024). Again, apart from the Sixties Scoop forced adoptions of children into residential schools, these are similar impacts to those experienced by the South African indigenous peoples.

In his research, Duran (2006) found that trauma experienced because of the residential school system is cumulative in the sense that indigenous people have on top of that trauma experienced other traumas such as racism and oppression, and this cumulative trauma is passed down intergenerationally. Furthermore, researchers have found that indigenous peoples underutilize available mental health and addiction services due to concerns that Western treatments "do not understand traditional spiritual and healing methods that continue to persist in many Aboriginal communities**"** (Marsh, Coholic, & Cote-Meek, 2015, p. 1). The research suggests that it is when mental health services integrate indigenous knowledge systems that they become useful and beneficial in managing issues of complex group trauma.

The use of indigenous health knowledge for healing trauma in Canada

Writing about the effects of trauma on the mental health of indigenous people in Canada, Twigg & Hengen (2009) state that "the lack of cultural safety and cultural competence in biomedical assessments leads to incorrect diagnoses, inadequate or inappropriate treatment, failed therapeutic alliances, high rates of noncompliance, reluctance to visit mainstream health facilities even when service is needed, and feelings of fear, disrespect and alienation"

(Twigg & Hengen, 2009, p. 10)**.** Some researchers have indicated that one way to overcome this challenge is by the inclusion of indigenous healing cosmologies, such as the Medicine Wheel, in the management of historical and intergenerational trauma (Mashford-Pringle & Shawanda, 2023). The figure below showcases how the concepts of self are understood in relation to others, the environment and the ancestors. Literature suggests that the Medicine Wheel is representative of the Canadian indigenous health model on which these concepts are based (Chansonneuve, 2005).

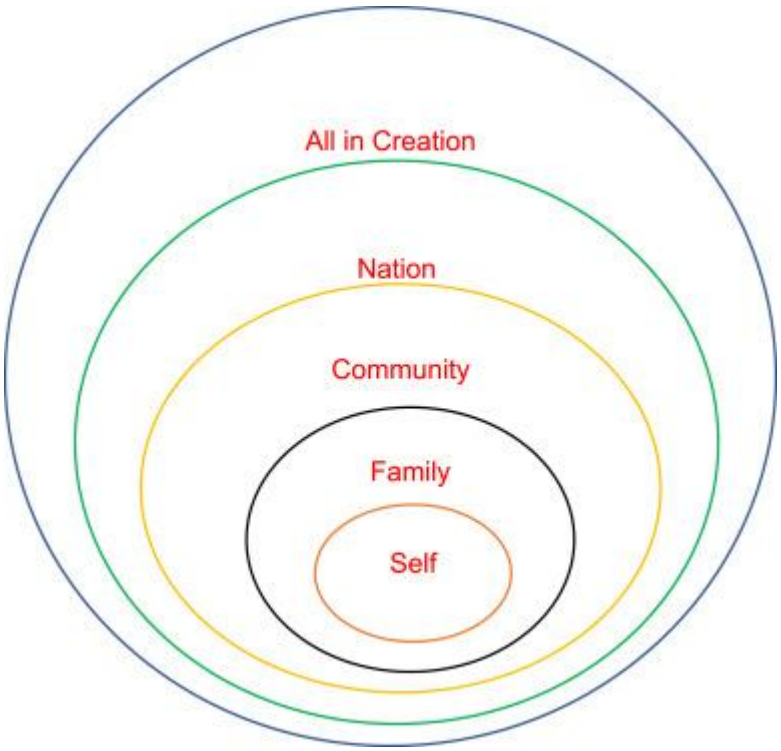

Figure 5: The medicine wheel that identifies health as state of balance between Self, Family, Community, Nation and All in Creation. Each spiral or ring deepens the learning and increases awareness of interconnectedness (Mashford-Pringle & Shawanda, 2023)**.**

According to proponents of the Medicine Wheel concept, it encourages the formation of balanced relationships between the self, family, community, nation, world, universe and through time and space as a way of understanding one's own wellbeing. Researchers at the Manitoba Trauma Information and Education Centre states that the breakdown in the healthy relationship on the self that are caused by trauma "manifests as isolation, shame, anger, self-

hatred, internalized racism, fear of authority, low self-esteem, self-destructive behaviours (substance abuse, gambling, alcoholism, suicidal behaviours) and aggression" (Connors, 2024, p. 1). At the family unit this trauma manifests as a loss of identity and connectedness to cultural systems which can lead to family violence, and at the community level the trauma manifests as loss of cultural practices and knowledge, language and community resources such as land which can lead to increased community violence and suicide (Connors, 2024). The use of the Medicine Wheel in trauma management seeks to address these issues by highlighting the interconnectedness between the self, family, community, ancestors and the environment, such that what happens to the group (including the ancestors of the group) and the environment has a huge impact on the health status of individuals, families and communities within that group. Culturally informed trauma care that is based on the Medicine Wheel approach seeks to establish a balance between these relationships as a means of healing. In the Xhosa context, the Medicine Wheel approach is reminiscent of the Xhosa indigenous health model that defines health as a state of balance between the self, family, community, ancestors and environment. This brings into light the undoubtable value of the inclusion of indigenous cosmology in trauma care in South Africa, which is something that my thesis offers through the exploration of healing modalities such as dreams, rituals and access to the natural environment.

Furthermore, researchers have argued that the key to healing trauma amongst indigenous people lies in the area of reclaiming cultural identity (Smith L. , Decolonizing methodologies: research and indigenous peoples, 1990) (Waldram, 1997). Some researchers have argued that reclaiming indigenous identity will require the revitalization of traditional values and approaches (Gagne, 1998) (McCormick, 1995) (Proulx & Perrault, 2000). Literature suggests that indigenous people in Canada consider indigenous healing to "include a wide range of activities, from physical cures using herbal medicines and other remedies, to the promotion of psychological and spiritual well-being using ceremony, counselling and the accumulated wisdom of Elders" (Marsh, Coholic, & Cote-Meek, 2015, p. 4)**.** The Marsh *et al* (2015) study suggests that one of the ways in which indigenous healing cosmologies can be incorporated into treatment for intergenerational trauma is through the concept of Two-Eyed Seeing, which is an approach that advocates for the bringing together of indigenous ways of knowing**,** spiritual understanding and wisdom to bring about healing. The argument being presented by Marsh et al (2015) is that through the incorporation of indigenous healing methods, indigenous people who are suffering from intergenerational trauma can further develop a

sense of identity which is extremely important for recovery. In practice, the Two-Eyed Seeing approach involves the incorporation of indigenous healing practices in the recovery process through the incorporation of indigenous cosmology such as drumming, smudging, and Sweat ceremonies. However, according to Connors (2024), there are other ways of understanding Two-Eyed Seeing, with one being "which recognizes that the indigenous cosmology incorporates both the intuitive, holistic, metaphorical mind of the brain's right hemisphere with the analytic, reductive, linear left hemisphere. Whereas western worldviews and knowledge rely predominantly on the functions of the linear, analytic left hemisphere." (Connors 2024, pg. 1). The argument being made by Connors (2024) is that from an indigenous perspective**,** knowledge can be produced from the body, mind, heart and spirit, further increasing indigenous people's capacity to minimize the negative effects of trauma. Studies that have explored the efficacy of the Two-Eyed Seeing method have found that communities that maintain and support indigenous cultural practices, beliefs, values and self-determination experience less crisis and cope more effectively with these traumatic events (Brave Heart, 2003). In other words, the Two-Eyed Seeing approach appears to increase indigenous people's capacity to cope with crisis so that the trauma emanating from such events is less likely to produce enduring harmful effects**.**

From the Xhosa-speaking perspective, *ukuthwasa* would be the system that incorporates the intuitive, holistic and metaphysical in the creation of knowledge, like the way in which the Two-Eyed Seeing approach is used as described by Connors (2024). *Ukuthwasa* is the process of becoming a traditional healer amongst the Xhosa-speaking people (Hirst, 2003). Those who are called receive messages and knowledge through dreams from their ancestors, and through the process of training, this knowledge becomes integrated into the family unit and essentially forms part of community knowledge. As a system of knowing, *ukuthwasa* serves as a vehicle for the transfer of knowledge within Xhosa-speaking families and communities (Makhanya, 2012). The dreamer is often required to share their dreams in a dream narration ceremony which has long been regarded as powerful sources of insight and guidance in various cultures in Southern Africa.

In the framework of *ukuthwasa,* dreams are considered a primary means through which ancestors communicate their calling to potential healers. Individuals undergoing *ukuthwasa* often experience vivid and symbolic dreams that reveal messages, omens, and instructions from the spirit world, and it is through dreams and divination that insights, solace and

remedies for affliction can be transferred from the ancestors via the recipient healer to his/her family, broader kin group and community (Mpofu, Peltzer, & Bojuwoye, 2011). These dreams are seen as a direct invitation from the ancestors to embark on the path of healing and spiritual service, guiding the initiates towards fulfilling their destiny as community healers who contribute to the knowledge generation of their communities (Bakow & Low, 2018) (Bernard, 2010). Therefore, much like the Two-Eyed Seeing approach, *ukuthwasa* acts as a system of knowledge generation for the purpose of individual and community healing. These processes that occur during *ukuthwasa* and their potential healing effects on self, family and community will be explored in greater detail in subsequent chapters.

4.3 United States of America

There are 574 federally recognized indigenous groups in the United States and Alaska, and groups are often referred to as tribes**,** nations, bands, pueblos, communities, and native villages, and indigenous American people are often referred to as Native Americans (NCAI, 2024). The effects of historical trauma amongst Native Americans has been extensively studied and researchers have found that Native Americans "face emotional challenges such as depression, substance abuse, collective trauma exposure, interpersonal losses and unresolved grief, and related problems within the lifespan and across generations" (Brave Heart, Chase, Elkins, & Altschul, 2011, p. 282). Additionally, in 2022, non-Hispanic American indigenous people had a suicide rate 91% greater than the general population, further highlighting the extent of the health disparities that affect indigenous groups in the country (CDC, 2024)**.**

In her examination of the theory of historical trauma among Native Americans, Brown-Rice (2013) found that the mass trauma of colonialism and oppression that was experienced by indigenous people in the United States resulted in detrimental effects on the population, leading to health disparities. Additionally, the oppressive colonial conquest decimated the native population through war, genocide, poverty and loss of land, leading to a mass reduction in the population numbers with indigenous people being denied their rights to grieve their losses in a culturally appropriate manner. She further argues that "this disenfranchised grief has resulted in the Native American people not being able to display traditional grief practices. As a result, subsequent generations have been left with feelings of shame, powerlessness and subordination" (Brown-Rice, 2013, p. 118). The lack of culturally appropriate methods of grieving historical trauma can also be applied to the context of South Africa's indigenous peoples, who themselves have suffered from poverty, loss of land, war

and death of large numbers of members of the population; it also saw the denigration and demonization of their cultural knowledge and belief systems through the imposition of European epistemologies in education and by the coercive influence of Christianity. The rapid loss of large numbers of the Xhosa-speaking population followed the cattle killing movement (see Section 1.4.2 of the Introduction chapter), and the disenfranchised grief has resulted in feelings of shame surrounding the use of cultural knowledge, has precipitated what Mndende (2021) refers to as a 'moral decline' coupled with subservience and hopelessness. She argues that Xhosa-speaking people's shame surrounding the use of traditional healing modalities needs to be addressed through the process of healing the pent-up grief about being a colonized people that was never truly addressed.

Approaches to managing historical trauma in the USA

According to Ortega-Williams, et al., (2021), recovering from trauma for victims of historical systemic violence requires a framework that considers both the individual processes of healing as well as the collective processes. This is because populations that have experienced mass trauma experience the trauma collectively and not just at an individual level. This means that interventions that are designed to manage trauma within these populations need to consider the role of collective consciousness in group healing. This is similar to the Medicine Wheel approach endorsed by the indigenous groups of Canada, as mentioned above, although it is represented diagrammatically in a slightly different way.

The diagram below highlights the interconnectedness of the factors that contribute to collective growth, healing and transformation within the affected group as suggested by Ortega-Williams, et al., (2021). From the framework, we can deduce that healing starts at the personal level when the individual experiences a spiritual change that opens up new possibilities for healing, which requires personal strength and a sense of connection to one's ancestors and culture, leading to increased appreciation for life which facilitates a spiritual change in the collective as various members of the group go through this process. New possibilities for growth can emerge from collective strength, thereby improving the way people relate to each other and fostering a stronger appreciation for life within the group.

Figure 6. A conceptual model of the historical trauma-posttraumatic growth framework (Ortega-Williams, et al., 2021)**.**

This framework encourages us to view trauma and healing more comprehensively. That is, it encourages the understanding that in indigenous communities that have their own culturally relevant ways of managing wellbeing, there is room for collective healing through engagement with the indigenous health models of the group. These can include personal and collective methods of healing that are supported by ancestral connections. From an anthropological view, Kleinman (1960) argues that concepts of illness and healing make sense through cultural explanations and healing modalities that are of relevance to the affected group. Therefore, in the approach that is presented by Ortega-Williams et al (2021), trauma theory is reconceptualized to consider the link between the personal and collective, thereby asserting that amongst indigenous people mass trauma is not just experienced at the individual level but is also experienced collectively at the community level. As the framework suggests, the effective healing of collective trauma will need to include individual and mass group-level growth and healing that is grounded in the cultural interpretations and healing modalities of the group.

In the South African context, the framework can also be applied to make sense of how collective healing can lead to collective transformation. Xhosa-speaking people have a deep

understanding of the power of collective consciousness in group healing. This type of group-orientated healing happens in the context of *ukuzalana* (kinship). The term 'ukuzalana' translates to 'birthing one another', emphasizing the interconnectedness between the individual and the group and vice versa. Health is managed through the use of rituals within the kin group and within the community level as kin groups usually invite other members of the broader community to join in the healing process (Jonas, 1986). Essentially, community healing rituals play a key role in shaping spirituality amongst indigenous people in South Africa because at its core it is centred around the idea of shared morality and shared destiny. Jonas (1989) argues that in the worldview of Xhosa-speaking people, "there is a particular emphasis on man in relation to other people, nature, and the supernatural" (Jonas, 1986, p. 58). This means that for Xhosa-speaking people, the human being does not exist in isolation but rather is a part of a bigger whole at both the family and community levels.

In such a system where one's humanity is closely intertwined with the humanities of others, then notions of shared destiny become an essential part that governs how people relate to each other. This is the concept of *Ubuntu*, which states that *umuntu ngumuntu ngabantu*, loosely translating to 'a person is a person through other people'. According to Magezi (2021), *Ubuntu* can be defined as "an empirical claim that our survival or well-being is causally dependent on others" and therefore is a theory of morality that governs indigenous social behaviour and ethics (Magezi, 2021, p. 1). As Magezi (2021) specifies, the kinship system on which *ubuntu* is based is in itself based on notions of shared values, knowledge and destiny, which can be utilized to address issues of health at a collective level. This aligns with the group healing framework presented by Ortega-Williams et al. (2021) and therefore has implications for integration into trauma management initiatives in South Africa.

4.4 Australia and New Zealand

Indigenous peoples in Australia and New Zealand have experienced historical trauma because of colonization and racism which has had destructive effects on their health, culture, and overall well-being (Priest, Paradies, & Gunthorpe, 2021). Research has shown that colonization in Australia and New Zealand has affected indigenous peoples at multiple levels "including health (mental/physical), social, spiritual, economic, and cultural levels" (Smallwood, Woods, Power, & Usher, 2021, p. 58)**.** According to research, land dispensation, coupled with systemic oppression were a source of mass trauma for Maori people in New Zealand (Keenan, 2012). Wirihana & Smith (2014) found that healing historical trauma in

New Zealand involves a collective approach that acknowledges the impact of colonization and the importance of Maori culture. The study reveals that the process of healing historical trauma includes reconnecting people to their culture and ancestry. Walker (1990) argues that European entry forcefully assimilated Maori people to Christian values in order to convert many indigenous people away from indigenous spirituality. Atkinson (2013) asserts that the psycho-social domination stemming from colonialism in Australia and New Zealand has resulted in what "Aboriginal people would call this the greatest violence, the violence that brings the loss of spirit, the destruction of self, of the soul" (Atkinson, 2013, p. 69)**.** Other scholars argue that indigenous people in Australia and New Zealand the poorest health status in these countries compared to other members of the population (Harfield, et al., 2015).

Approaches to managing historical trauma in Australia and New Zealand

Research shows that the use of indigenous healing cosmologies can help lift the burden of disease amongst indigenous people in Australia and New Zealand. According to Wirihana & Smith (2014), Maori people "viewed wellbeing as a holistic process which emphasised the interconnected nature of spirit, body, society and the natural environment**"** (Wirihana & Smith, 2014, p. 201)**.** The Maori indigenous health understanding is based on a holistic understanding of health and wellbeing (New Zealand Health, 2024). This is because Maori people "have been promoting the use of traditional knowledge and practice to enhance wellbeing for many decades… and these insights led to the development of Maori-centred approaches to therapy which aimed to improve Maori wellbeing by enhancing identity, reconnecting with cultural heritage and balancing relationships within families and wider tribal networks**"** (Wirihana & Smith, 2014, p. 202).

Generational wellbeing and acknowledging the importance of ancestry is also inherent to Maori wellbeing, and hence kinship systems play a key role in maintain good health, coupled with community knowledge and shared cultural practices as key elements of enhancing wellbeing. Moreover, scholars argue that Maori people believe their ancestors have a protective relationship towards their descendants and that spirituality amongst the Maori people is a phenomenon that is strongly connected to sustaining wellbeing and supporting methods of healing (Wirihana & Smith, 2014). A key feature of these spiritual practices includes the use cultural traditional music and dance as therapy.

According to the Australian Institute of Health and Welfare (AIHW)**,** the removal of indigenous children from their families in what was termed the Stolen Generation (1800s to 1969) resulted in intergenerational cycles of trauma as family ties and kinship bonds were tethered in the process, and in turn "survivors of the Stolen Generations and their descendants have demonstrably poorer health and wellbeing outcomes, compared with those who were not removed and their descendants" (Darwin, Vervoort, Vollert, & Blustein, 2023, p. vi).

A similar process to the Stolen Generation occurred in Canada, however this form of intervention did not happen in South Africa although similar effects were caused by the forced labour migration policies and influx control legislation, which led to the breakdown of family units and erosion of cultural practices. In efforts to manage this trauma, the AIHW introduced programs that serve to assist affected individuals and families through the introduction of indigenous healing cosmologies in the management of trauma. These programs include:

Red Dust Healing

The program addresses issues of trauma amongst indigenous Australian families and communities by providing a culturally sensitive environment for healing. This is achieved through "using narratives from an individual's life and encouraging them to reflect on their own situation... participants are also encouraged to examine their own personal hurt in order to heal themselves. This is seen as the first step in addressing the hurt they inflict on others within their personal relationships, their family and the overall patterns of violence and abuse in their lives" (Darwin, Vervoort, Vollert, & Blustein, 2023, p. 24). This program has been successful because it uses culturally relevant tools for communication, such as storytelling, to build relationships between the participants. This way, healing takes place at both the individual level and at the community level. Through the building of community trust, individuals can develop a sense of belonging and acceptance that perhaps they might not have felt in their history of family violence. This in turn allows participants to be more aware of their own feelings so that they can be sensitive to the feelings of others within the community.

Murri School

The Murri School initiative serves to address complex issues of historical and intergenerational trauma among indigenous youth, families and communities through the integration of indigenous knowledge into the school curriculum. Additionally, "the school aims to improve the SEWB of young indigenous people by strengthening cultural connectedness and identity through providing opportunities for individual and family healing by building skills to manage pain and loss" (Darwin et al, 2023, p. 22). This is achieved by offering a culturally informed curriculum that addresses issues of community knowledge, family wellbeing, community development and cultural engagement. The idea is that if young indigenous people see their culture reflected in their education, then this greatly improves their self-esteem and pride in their heritage thus allowing them to overcome feelings of hopelessness and despair.

Cultural Social and Emotional Wellbeing (CSEW) Program

The CSEW program is aimed at helping indigenous people build resistance by utilizing culturally appropriate methods of addressing pain and suffering. This is done by integrating indigenous methods of exploring identity through group discussions where participants are encouraged to be vulnerable with each other and to share their stories of violence, pain and suffering and grief. This strategy builds a strong sense of community as participants have usually faced similar circumstances in their lives. This sense of community greatly reduces the feelings of alienation that usually accompany trauma. Through the group discussions, participants can help each other to cope with issues that affect them and their communities, thus building community resilience. Additionally, this program has been proven to work because it "privileges indigenous ways of doing, knowing and being, including program design, methodologies and delivery" (Darwin, Vervoort, Vollert, & Blustein, 2023, p. 23)**.**

The use of indigenous healing cosmologies in Australia and New Zealand has proven to be successful in the management of historical and intergenerational trauma because the methods used are deeply grounded in indigenous knowledge. The idea behind the Rest Dust Healing and The Murri School approaches is that the revitalization of group ethics and morality can act as a means of strengthening the bonds that have been undermined by trauma. This regeneration of the group's moral compass allows people to feel deeply connected with each other, thereby ensuring that communities foster healthy bonds, thereby creating resilience in

the face of crisis. In the South African Xhosa context, Ohajunwa (2019) argues that Xhosa-speaking people such as the amaBomvana apply the concept of group ethics and morality to foster ubuntu and community unity. By fostering these community bonds, the group can promote methods of collective healing and wellbeing that are grounded in their ontology.

4.5 Approaches to managing trauma in the context of South Africa

Much work has been done in South Africa in trauma research, with particular focus on exploring what a decolonial approach to emotional well-being and mental health looks like in development and humanitarian response. The Sophiatown Community Psychological Services (SCPS) is a psychosocial support organisation based in Johannesburg that works with the mental health challenges of poverty, violence, forced migration and HIV and AIDS. According to their official website, their driving "ethos is rooted in the belief that individual destinies are inextricably linked to the social, economic and political conditions of the time, and that poverty, social exclusion and marginalization, oppression, persecution, violence, and war impact profoundly on the mental health and emotional well-being of individuals, families and communities" (SCPS, 2024).

The organization launched the Siyabanakekela programme as a means of 'healing the wounded healer' through adoption of the understanding that trauma practitioners move beyond conventional approaches to counselling and are thus deeply affected by the trauma experiences of the patients they tend to. The idea behind the organization's work is that "carers who have their own hurts and wounds attended to, will be able to care better for the hurts and wounds of others. Breaking the silence and sharing experiences with each other, helps find sources of support and solidarity. Carers who find their own voice and are able to speak out against injustice, will be able to allow others to speak for themselves as well" (Afuape, 2022, p. 105). The idea of the Siyabanakelela program is that healers who have been wounded by their work end up being highly effective in their work of healing, in the sense that therapists who feel the pain along with their patients are better able to take care of others.

The concept of the wounded healer has been explored by Jackson (2021) who describes the wounded healer as someone who has experienced illness or trauma in their own personal life that "has left lingering effects on him in the form of lessons learned that later served him in ministering to others" (Jackson, 2001, p. 1). Jackson explains that the concept of the wounded healer does not refer to burnout or being overworked in any way but rather refers to the inner

vulnerability of a healer which in turn makes them sensitive to the suffering of others. Jackson (2021) further highlights that in many cultures around the world, the idea that the healer must undergo a rigorous process of pain as part of their vocation or calling is accepted as an essential step because through this suffering, the healer learns how to have the resilience to overcome adversity. This is synonymous with Carl Jung's understanding of the concept of the wounded healer in which wounded healers gain insight and resilience from their own traumatic experiences thus enabling them to effectively apply transformative healing approaches to the patients they heal (Jung, 1963).

In a similar fashion, the journey of *ukuthwasa* is understood to imbue the wounded healer with wisdom and knowledge in the sense that the healer must experience illness and suffering to effectively assist others to overcome their own afflictions. If the healer has not gone through the process of learning how to be resilient, it is going to be difficult for them to foster resilience in others. Hence *ukuthwasa* is often referred to as *ingulo* (the sickness) because in essence it is understood that the healer must understand sickness and pain to heal the sickness and pain in others. Therefore, the wounded healer must experience *ingulo* so that they can know how to heal the *ingulo* of others, hence the training of traditional healers is done by graduated healers, many of whom are themselves wounded healers who have gone through the process of *ingulo*. Many traditional healers experience *ukuthwasa* as a period of deep trouble, suffering and wounding, further highlighting the importance of the concept of wounded healers in the management of community health in the South African context (Bernard, 2010).

My study is unique in the sense that I used a primarily autoethnographic approach to studying my own experiences as a 'wounded healer' within the context of my own family trauma that has manifested over time. These personal accounts demonstrate how my calling to become a healer drew heavily on ancestral knowledge pertaining to the interpretation and management of trauma. Although I do make it clear in later chapters of this thesis that the data emanating from this study does not account for all the cultural interpretations that exist within Xhosa society, however, my own personal narratives as a wounded healer that uses her 'wounding' to heal both herself and her family is valuable to the discussion.

The gap in knowledge in the South African context

The Office of the Chair for Historical Trauma and Transformation and the SARChI Chair in Violent Histories and Transgenerational Trauma at Stellenbosch University aims to conceptualize issues of historical violence and the trauma it has caused victims and their descendants by engaging in research that analyses the strategies that have been used to heal that violence (SU, 2024)**.** Gobodo-Madikizela, the Research Chair, argues that "in the aftermath of historical trauma, restoring human bonds requires a new vocabulary of re-humanization. This new mode of being human calls for a "reparative humanism" that opens toward a horizon of an ethics of care for the sake of a transformed society" (Gobodo-Madikizela, 2016, p. 1). She also presents the idea that understandings of morality within the South African context play a pivotal role in the understanding of trauma management and needs to be explored in research as it can offer a lot of insight about the efficacy of culturally informed methods of managing trauma.

A study by Fourie, Stein, Solms, Gobodo-Madikizela & Decety (2017) highlighted the need for further enquiry about group processes in trauma management by showcasing that "moral emotions elicited in response to others' suffering are mediated by empathy and affect how we respond to their pain. South Africa provides a unique opportunity to study group processes given its racially divided past" (Fourie, Stein, Solms, Gobodo-Madikizela, & Decety, 2017, p. 881). However, the authors conceptualize morality from a western-centred approach of 'good versus evil' without diving deep into the conceptualizations of what constitutes immoral behaviour from different cultural perspectives, such as within the Xhosa cultural context, and how that has shaped people's perception of 'morality'. My thesis offers a more culturally appropriate intervention strategy that is centred around indigenous perspectives in the maintenance of healthy kinship relationships as a form of morality, thus offering an innovative way to conceptualizing trauma within the South African context.

The idea that group processes can possibly be used in managing trauma has been explored by researchers within the South African indigenous context. In their study, Mawere & Tshamano (2023) assert that "African Indigenous Knowledge Systems (AIKS) offer a unique approach to restorative justice by promoting healing and reconciliation through community involvement, storytelling, and cultural practices" (Mawere & Tshamano, 2023, p. 179). This implies that indigenous South African cultural and spiritual practices, which are grounded in indigenous knowledge can be used to effectively promote healing from the effects of trauma

and violence. This is because indigenous South African health systems work by integrating the healing of the individual with that of the community since it is within the context of culture that the individual understands their suffering.

Additionally, the methods that are used by indigenous communities to manage collective suffering are grounded in collective consciousness as knowledge is generated through the collective contributions of individuals, families and communities. This process of generating knowledge allows for communities to share in the collective wisdom and cultural resources that are designed to maintain wellbeing. Furthermore, the authors conceptualize their work within the framework of The African Renaissance Theory, "which represents a transformative movement that seeks to revive and celebrate Africa's cultural, social, and economic potential as it calls for Africans to reclaim their identity, challenge negative stereotypes, and foster a sense of pride in their heritage" (Mawere & Tshamano, 2023, p. 180). This conceptualization recognizes the need for indigenous African people to embrace indigenous cultures, languages, and traditions as sources of strength and resilience in the face of historical trauma.

Moreover, psychological studies in South Africa have also attempted to understand the connection between trauma healing and cultural practices. A study by Koen, et al. (2017) that investigated the association between maternal posttraumatic stress disorder (PTSD) and infant development in a South African birth cohort found that "approximately a third (30%) of the study sample reported exposure to trauma during childhood, with half having been exposed to intimate partner violence (IPV) during their lifetimes" (Koen, et al., 2017, p. 295). The data from the study showed a high prevalence of trauma amongst South African women, which invariably affects their offspring's neurological development. South Africa has one of the highest rates of gender-based violence in the world, and this is an area of concern given the high prevalence of exposure to trauma and PTSD in pregnant women. The authors argue that their study data "may be important for informing culturally appropriate health promotion, screening and intervention campaigns" (ibid).

Some scholars have investigated the importance of using culturally relevant tools for the diagnosis and management of trauma for South Africa's population**.** Wyatt, Thames, Simbayi, Stein, Burns, & Maselesele (2017) found that although the South African government has invested a great deal in the improvement of mental health for indigenous South Africans and many structural factors have been studied that contribute to mental health

problems in South Africa, PTSD has received less attention. The study further highlights the importance of developing culturally informed trauma practice in South Africa to effectively address the issue of the health disparities that are experienced by victims of trauma.

However, regarding the high level of gender-based violence (GBV) in the country, it is important to note how the historical processes that have led to HT & IGT (as presented in the introductory chapter) have played a role in exacerbating this. These historical traumas had the effect of demasculinizing an already undermined male sense of self-worth, which may have exacerbated conflicts in the home, leading to increased alcoholism, GBV and other forms of gendered tensions. Diko (2023) claims that these historical factors have resulted in a situation where GBV in South Africa has become "a post-colonial social ill" (Diko, 2023, p. 1).

The undermining of gender roles in indigenous South African society was brought about by changing political-economic structures, forced migrant labour and breakup of families. This meant that women were left with more responsibilities in the home, and even in ritual, further undermining the role of males. Malatjie & Mamokhere (2024) agree that indeed the high prevalence of GBV in South Africa can be "primarily attributed to historical systems of social inequality, patriarchy and racism that dominated during the apartheid regimes, with lasting impacts persisting today" (Malatjie & Mamokhere, 2024, p. 2720). Therefore, in terms of establishing culturally informed trauma practice in South Africa, historical cultural dynamics and socioeconomic variables need to be considered in the conceptualization of what continues trauma within the indigenous context. My thesis aims to offer an exploration of these concepts by highlighting how the tethering of kinship relationships stemming from the impacts of colonial and apartheid policies can intersect with cultural dynamics such as witchcraft accusations to create new traumas or exacerbate already existing ones.

The trauma model presented by Wyatt et al (2017) demonstrates that there is currently a gap in knowledge with regards to understanding how cultural knowledge can positively influence mental health. The authors have found that trauma experienced by indigenous children and families are relatively understudied in South Africa and that this is an important emerging research area that needs to be further examined. They assert that with more research we will be able to bridge the knowledge gap by primarily focusing on the mental health disparities that follow traumatic experiences for victims of trauma in South Africa. Madigoe (2017) aimed to cover the cultural context of violence amongst Zulu people, and asserts that there is a need to "develop a culture specific screening tool for trauma, and to determine whether it

would significantly increase the probability of eliciting traumatic events and associated symptoms when added to a Western diagnostic tool for trauma" (Madigoe, Burns, Zhang, & Subramaney, 2017, p. 274), thus highlighting the need for culture bound beliefs about mental illness and trauma to be seriously taken into consideration when assessing symptoms of post-traumatic stress amongst indigenous South Africans.

However, scholars highlight the complexities of the effects of trauma and call for tailored interventions to address the lasting effects on mental health in South Africa by asserting that "while culturally specific tools assist with proper diagnosis of mental health problems, it is equally important to integrate the cultural context in treatment following traumatic incidences**"** (Wyatt, et al., 2017, p. 249)**.** Therefore, there is still much work to be done in South Africa as it relates to culturally informed trauma practice and the integration of indigenous knowledge in the management of trauma.

Bridging the knowledge gap: possibilities for the inclusion of indigenous cosmologies for the management of trauma in South Africa

Research has shown that spirituality can serve as a resource for healing trauma. Paavola's (2017) PhD thesis explored the ways in which dreams can be used as a tool in trauma recovery in a domestic violence shelter in an urban area of the United States of America. She found that dreams are an important avenue for patients to process their emotions because they provide supportive imagery to existential questions, thereby resolving blockages in the healing process of the patient (Paavola, 2017). The Two-Eyed Seeing approach that is utilized in Canada in the management of trauma is deeply grounded in the idea of spiritual communication with the other worldly realm of spirits and ancestors for the retrieval of information that can be utilized for purposes of healing. In terms of trauma management, the Two-Eyed Seeing approach integrates indigenous healing cosmologies such as visions, dream narratives and dream interpretations in the process of generating knowledge that can be utilized in the process of healing trauma (Connors, 2024). This works by analysing the dreams of the individuals who have experienced trauma.

Researchers have argued that one way to make health systems more equitable and efficient for indigenous people is by including indigenous knowledge systems, practices and health models in healthcare management (Jeffery, Kurtz, & Jones, 2021). Talal Asad (1993) argues that religion is not primarily about belief but about embodied practices of discipline, ritual,

and power. This means that he redirects from the illusion that religion exists as a separate universal category of experience but rather emphasizes that it is a modern Western construct embedded in Christian ideology. In this perspective, indigenous spiritual practices are not merely explanatory systems but forms of embodied moral life.

Researchers in Canada have attempted to make healthcare more equitable for indigenous Canadians by including the Two-Eyed Seeing approach in healthcare services as a means of bridging this gap. This is because the Two-Eyed approach "sees from one eye with the strengths of Indigenous knowledge and ways of knowing, and from the other eye with the strengths of western knowledge, respectfully embracing both" (Wieman & Malhorta, 2023, p. 1). One way in which this approach can be applied in trauma therapy is through talking circles, which serve to incorporate indigenous health management methods such as dream rituals, dream narratives/storytelling, traditional music (songs and dance) as well as burning of indigenous herbs and plants as incense.

However, the scholars who embrace this approach do not provide any details on dream-induced ritual responses following these health management methods. My thesis offers an innovative conceptualization because it provided evidence on the efficacy of dream-induced ritual responses, especially in the context of how the natural environment can be accessed through dreams and rituals through the convocation of water divinities such *abantu bomlabo* as a means of maintaining both personal and communal wellbeing.

Additionally, my thesis argues for the importance of the role of community knowledge, cultural landscapes and the natural environment in the building of community resilience for it is in the spiritual connections with these spaces where Xhosa indigenous practices still excel. The idea of community wellbeing serving as sources of resilience has been identified by Ohajunwa (2019) in her study of the amaBomvana Xhosa-speaking people of South Africa. In her study she found that the concept of *ukulungisa* (fixing what has been broken) is how Bomvana people utilize community bonds in addressing issues of collective pain and suffering.

Ohajunwa et al (2021) further adds that since relationships with community members are considered an essential part of maintaining good health, the amaBomvana people regard collective effort as necessary in facilitating healing at the collective level. This means that in the process of *ukulungisa*, members of the community work together to revitalize community

spaces that have been compromised in order to foster healing for the betterment of the entire group. These spaces include *ubuntu*, ritual, and the relationships with ancestors and nature. Moreover, she further found that for Bomvana people, through the revitalization of community ties, the impact of historical trauma can be addressed since it is in the collective space that "their identity was sure, their moral logic that held them together was in place" (Ohajunwa, Mji, & Kalenga, 2021, p. 3). This shows that the idea of revitalizing community moral consciousness through fostering stronger relationships can be an effective approach for mitigating the effects of historical trauma on affected indigenous communities in South Africa.

The research from this PhD thesis aims to contribute to the understandings of how cultural practices can be utilized in the management of trauma within the South African context by highlighting the ways in which the Xhosa-speaking people who participated in this study integrate indigenous knowledge in their efforts to manage trauma and suffering. However, there is a gap in knowledge in terms of studies that have focused on indigenous healing cosmologies such as dreams in the management of trauma-related illness in the South African context.

As highlighted in the sections above, indigenous healing cosmologies such as dreaming and ritual have proven effective in healing trauma in population in Canada, USA, Australia and New Zealand. Bernard (2010) highlights how the use of dreams and ritual can assist in the healing pain and to overcome struggles in the South African context by asserting that dreams are used to connect to the ancestors, through ritual intervention, often located within culturally significant landscapes, who then offer knowledge, guidance and wisdom that can be applied to healing. Dreaming and dream interpretation, and subsequent ritual intervention, are therefore an important practice in many South African cultures, with individuals seeking the assistance of spiritual leaders or diviners, who themselves are wounded healers, to help decipher the messages conveyed in their dreams (Bernard, 2010). Dream interpretation thus has the potential to be integrated into the healthcare services that serve indigenous people in South Africa.

However, while the role of dreams is important to consider in culturally appropriate trauma therapies one needs to understand that in many instances these should be coupled with the correct ritual responses that dreams may precipitate, especially in the context of this study. For many Xhosa-speaking groups dreams serve as the conduit for ritual action. It is the ritual

response that in effect helps with healing the trauma, especially within kin groups. Little exploration has been done on these dream-linked rituals in the aforementioned studies, and this is where my study can contribute some valuable and detailed insights.

Applying the Two-Eyed Seeing approach in the Xhosa context: dreams as a source of knowledge

Central to Xhosa cosmology is the notion of ancestral communication through dreams, a phenomenon that plays a vital role in connecting the living with their departed ancestors for the maintenance of health and wellbeing (Bakow & Low, 2018). Xhosa-speaking people acknowledge the significance of dream symbolism and interpretation as part of the dream process, hence the emphasis on the idea of *ukulawula amathongo* which searches for meaning in the dreams as a form of knowledge generation (Booi, 2004). Amongst the indigenous people of South Africa, dream interpretation is often performed by designated individuals with spiritual insight, such as diviners or elders, who possess the knowledge to decipher the symbolic language of dreams (Edwards, 1985).

Xhosa-speaking people acknowledge that dreams offer messages, warnings, and guidance, and hence dream interpretation is a revered practice with trained diviners playing a crucial role in deciphering dream symbolism. If we are going to attempt to use dreams as a source of knowledge in managing the health of Xhosa-speaking people, then we need to first understand the ways in which dreams are understood and interpreted in the Xhosa cultural context. Some of the dream symbolism observed amongst Xhosa-speaking people is deeply embedded in the environment and cultural landscapes that are significant sites of ancestral power and manifestation for Xhosa kin groups, and these can have implications for healing include:

Animals:

Animals often feature prominently in Xhosa dream symbolism, with each animal carrying specific meanings. For example, a lion may symbolize strength and leadership, while a snake could either represent a clan totem or transformation or danger (Bernard, 2010) (Burhmann, 1986). Jonas (1986) argues that certain animal species have particular significance as manifestations of clan ancestors amongst the Xhosa-speaking people. It is believed that every

clan has its own clan animals, referred to as *isilo,* although clans usually refer to the same animal species as ancestral animal (Jonas, 1986)**.** Cocks, Dold, & Vetter (2012) state that for both urban and rural Xhosa-speakers, certain animals are believed to be representatives of the ancestors**,** examples of which include swallows (*iinkonjane*) and wagtails (*iicelo***)**. The authors state that these animals when frequently seen around the home, nesting or entering the house, were reported to bring good luck and blessings from the ancestors. During times of crisis, ancestors appear as animals in dreams, instructing their kin to perform proprietary rituals aimed at fostering reconciliation and healing, thereby building resilience. An example of this would be the water monitor (*uxam*) (Hirst, 1990) (Bernard, 2010). The *majola* snake amongst the amaMpondomise people symbolises the ancestors delivering critical messages about healing and reconciliation within the Jola clan kinship (Mlisa, 2019). Apart from dream symbolism, overall animals provide livelihood and sustenance for Xhosa-speaking families, while still being used for sacrifices within various ceremonies to heal broken relationships and maintain ongoing relationships between people and the ancestors (Ohajunwa, 2019)**.**

Natural Environment:

Elements such as water, fire, and earth hold symbolic significance in Xhosa dreams, reflecting themes of purification, renewal, and grounding (Bakow & Low, 2018)**.** Cocks, Dold & Vetter (2012) attest to the importance of the natural environment in the spiritual symbolism amongst Xhosa-speaking people by stating that "thicket vegetation, known locally as *ihlathi lesiXhosa***,** is considered to be a sacred place where the ancestors communicate with their living descendants by means of messengers (*izithunywa*) in the form of birds, mammals, insects or even the wind **"** (Cocks, Dold, & Vetter, 'God is my forest' - Xhosa cultural values provide untapped opportunities for conservation, 2012)**.** The importance of natural elements in spirituality is observed in other indigenous groups in South Africa, apart from the Xhosa-speaking groups e.g. mist/rain is significant for Zulu-speakers especially when it occurs during ritual activities (Bernard, 2010)**.** In their study of the significance of landscapes, fauna and flora amongst the Tsonga people of the Limpopo province, Anthony & Bellinger show that in South Africa, natural landscapes play a key role in fulfilling an indigenous community's livelihood needs since it is believed to contribute to a community's overall well-being including maintaining socio-cultural norms and medicine (Anthony & Bellinger, 2007)**.**

Cultural Symbols:

Traditional Xhosa artefacts, clothing, or rituals may appear in dreams, conveying messages related to heritage, identity, and cultural practices that are relevant for healing. These include:

- Beads (intsimbi)

Beads in the isiXhosa language are known an **'**intsimbi**'**, meaning 'the iron', referring to its cultural interpretation as a strong item of spiritual fortification. Beads can come in various colours, depending on the wearer's clan history, lineage and ritual performed (Rozani & Goduka, 2017)**.** Beads are used as offerings to the ancestors and divinities in order to bring about healing and reconciliation in times of crisis.

- Seeds (imbewu)

A crucial part of the ritual and ceremony offerings amongst the Xhosa-speaking people is plant seeds. The offering of seeds to the ancestors and guardians of sacred sites is intended with the purpose of asking for multiplication of food in the coming season by pouring them into the water for the ancestors to receive and multiply them**.** Seeds also represent the concepts of fertility, renewal, productiveness and new beginnings, which are essential to the process of reconciliation and healing (May, 2019) (Bernard, 2010). So, by making an offering of seeds, the ancestors are being asked to assist by bringing forth renewal and revitalization where it is needed the most. People who dream of seeds are usually being asked by the ancestors to perform a ritual that will serve to bring about renewal and growth following a painful incident.

- Umqombothi (traditional beer)

Umqombothi is a central part of many Xhosa cultural celebrations, including weddings, funerals, and rituals. Together with meat and snuff/tobacco, it is regarded as an essential offering for the ancestors and is believed to facilitate contact with them. The beer is brewed from sorghum in fermentation process that includes boiling of the sorghum to make a porridge, the cooling and transfer of the porridge into a fermentation cask over a period of four days. Thus, it is generally poured on the ground as a libation for the ancestors as it is a representation of dedication and reverence. Additionally, traditional beer is seldom enjoyed in solitude but often shared with others and the ancestors as it plays a substantial role in

fostering bonds between people and can be used in times of conflict as a means of mediation and reconciliation (Goitsemodimo, 2020)**.**

- Tobacco (icuba)

Tobacco is used in many Xhosa rituals, such as the *umhlwayelelo/intlwayelelo,* a propitiatory rite for the river people as beings of healing and reconciliation following a traumatic event. During this ritual, tobacco is offered at sacred sites such as the river or the forest to appease the ancestors (Booi, 2004). Hirst (1990) and Bernard (2010) both highlight the significance of these rituals and how access to the correct sites is crucial as problems emerge when they are conducted on private land. Xhosa-speaking people envision smoke as communication with the ancestors and a plea for protection from bad spirits, as well as human solidarity since the ancestors can no longer smoke but enjoyed the sensation when they were alive (van der Walt, 2015)**.** Hence then, tobacco is used to build solidarity with the ancestral spirits from which assistance is being requested. People who dream of tobacco are often being asked to perform a ritual that serves to foster healthy relationships between the living kin and the ancestors, thereby maintaining wellbeing.

Arguments for the inclusion of dreams and related rituals in trauma healing

Hartmann (1996) argues that dreams contextualize dominant emotions, and as such dreams that occur after trauma "explain metaphorically the emotional state of the dreamer" such that through the interpretation of symbols, rituals, and practices surrounding dreams, the dreamer can uphold the sacredness of this mystical experience and recognize the transformative power of dream messages in guiding personal decisions (Hartmann, 1996, p. 147). Additionally, Hartmann (1995) argues that dreaming is a form of psychotherapy that can give the trauma patient a safe space to make associations between their dreams and the traumatic incident, thereby allowing for the disturbing emotions that are associated with the trauma to be resolved. Moreover, Pesant & Zadra (2004) make the argument that dream interpretation is a powerful therapeutic tool because it includes the active participation of the patient in order to make sense of their dreams and their underlying emotions and therefore dreams in trauma therapy are "psychologically meaningful and thus have clinical value" (Pesant & Zadra, 2004, p. 481).

According to Kilianova (2010) who studied dream rituals amongst the indigenous people of Ukraine, dream technology in trauma healing involves the setting of intentions before sleep, meditating, or engaging in rituals to invite dreams that offer solutions to the dreamer's problems, insights into the future, and health management strategies**.** These practices are synonymous with Jung's (1963) theory of dreaming that demonstrates the importance of active engagement with dreams as a sacred and transformative experience that has the potential for generating innovating methods of healing. As explained by Jungian psychoanalysis; by exploring the symbolism and significance of dream narratives, we can gain a deeper appreciation for the spiritual wisdom and cultural richness embedded in the cultural systems of the population that may have implications for healing trauma (Jung, 1963).

Furthermore, the role of dreams in the spirituality of indigenous people has been studied in various countries around the world**,** showcasing that indeed dream rituals and practices are universally employed to induce specific dreams or to seek guidance from the spiritual realm. According to Peltzer **(**1990), among the Yoruba people of West Africa, dreams are seen as symbolic messages that require interpretation since they are generally viewed as either good or bad omens. The Yoruba believe that one's past experiences can resurface in dreams (Peltzer, 1990).

Amongst the Maasai of Kenya, dreams are considered a spiritual connection to the spirits of deceased ancestors. The Maasai people are traditionally animist and thus have a deep connection to their land and the deity Enkai, the creator of the world who communicates with the people via dreams (Nell, 2012). Dreams are also regarded as sources of guidance and prophetic insights in many African traditional religions such as Ifa in Nigeria, Akan in Ghana and Ivory Coast, Vodun in Benin and Waaqeffanna in the Somali Peninsula, amongst others (Jedrej, 1992)**.** Across Africa, it is believed that through dreams, individuals can receive instructions on important life decisions, warnings of impending danger, and glimpses into the future. Dreams are seen as a way in which the spiritual realm can offer guidance and direction to individuals seeking clarity, healing and wisdom in their lives (Mbiti, 1997)**.**

The cultural and spiritual foundations of dreams in African spirituality highlight the profound significance of dreams as a means of communication with ancestors, deities, and the spiritual realm, making them possible vehicles for generating innovative ways to manage wellbeing. Thus in African spirituality, dreams are not merely fleeting images of the night but sacred

encounters that bridge the earthly and spiritual worlds, enriching the spiritual tapestry of African societies, thereby making them valuable sources of information that can be used to manage illness (Mbiti, 1997). However, there has not been much emphasis or detail provided on the roles of dreams and dream-related rituals in these aforementioned studies on indigenous management of historical trauma, or how they may be embedded within culturally significant landscapes.

The Two-Eyed Seeing approach outlined in this chapter in addressing HT/IGT presents an area where these healing strategies may be further explored. This is an area that the current thesis aims to highlight and explore in more detail, especially through using a largely autoethnographic approach.

4.5 Conclusion:

This chapter served to explore the work that has been done in Canada, USA, Australia and New Zealand in relation to the use of indigenous healing cosmologies in the management of trauma and highlights the gap in knowledge in the South African context. Researchers in these countries have expressed the need for the inclusion of indigenous ways of knowing in the development of trauma healing initiatives. Additionally, this chapter presented some of the initiatives that have proven to be successful in these countries and the implications those could have in the context of Xhosa-speaking people. The following chapter presents the methodology that was applied in this study to elicit data by using dreams as a source of information.

CHAPTER 5: Methodology

Wadidiyela unonkala ngasemlanjeni

Ukhanda amayeza ngasemlanjeni

Wenza ngabomu unonkala ngasemlanjeni

(The crab is brewing by the river)

(The crab is making medicine by the river)

(The crab is brewing by the river on purpose)

5.1 Introduction to the chapter

The Xhosa song written above symbolizes the generation of new information through the creation of new ways of knowing, and Xhosa-speaking people sing this song in ritual when information is being requested from the ancestors for the purpose of healing and reconciliation. Xhosa-speaking people associate *ukudidiyela* (brewing) with the creation of new knowledge by bringing together existing methods of knowledge-making in order to generate new information (and new methods). Hence then, *ukudidiyela* symbolizes creativity and innovation that is grounded in Xhosa indigenous cosmology, ontology and epistemology. The crab (*unonkala*) is associated with ancestors and the ancient wisdom that they offer, and the river (*emlanjeni*) is the place where the ancestors reside and therefore is the space where this wisdom is kept. The information received from this 'brewing' is then used to inform healing practices that serve to benefit the community at large because Xhosa-speaking people understand medicine as something to be shared collectively, and therefore information that relates to wellness and wellbeing is 'brewed' for the benefit of the collective. In this chapter, I will detail the *ukudidiyela* methods that I utilized to generate knowledge and how these methods were informed by the ancestors through the use of Xhosa healing cosmologies in order to create new ways of understanding trauma.

This study was initially intended to be an ethnography that detailed personal narratives of a wide range of participants from the study area, but due to the nature of the trauma that I as a researcher experienced during the research period, the study ended up taking more of an autoethnographic approach. Hence it is important to note that this study does not attempt to make blanket statements about the entire Xhosa-speaking population of the study area but instead attempts to unpack the understandings of trauma according to the lived experiences of the individuals whom I managed to recruit to participate in the study.

In this chapter, a description of how data was collected, analysed and validated is given. The approaches used to collect data included dream interpretation as postulated by the anthropology of dreaming, the anthropology of extraordinary experience (AEE) and anthropology at home. Data was collected through a series of interviews to construct narratives of the participant's experiences of what they understood to constitute trauma, and thematic analysis was used to find the emerging themes from these narratives. Additionally, the data analysis of this study was positioned in the framework of hermeneutic (interpretive) phenomenology since it is a data analysis approach that "focuses on the human experience as it is lived" (Alsaigh & Coyne, 2021, p. 2), hence its usefulness in research that aims to study people's personal experiences. A description of the study design and the *ukudidiyela* methods that were used throughout the study are given in the following sections.

5.2 Study design

This study aimed to explore the complex understandings of trauma within the indigenous Xhosa-speaking people of the Peddie region and hence can appropriately be categorized as ethnographic since it aimed to describe key past events through storytelling and personal narratives (Glass & Hopkins, 1984). For clarity, I opt to classify this study as 'indigenous ethnography' due to the fact that I as the researcher am an indigenous-born Xhosa-speaking person from the study area and therefore have shared understandings and experiences with historical trauma in the area. In addition to interviews with key participants, I contributed my own personal narratives as part of the data collection process.

Furthermore, this study qualifies as indigenous ethnography in that "indigenous ethnographers are those who have their origins in non-European or non-western cultures and who share a history of colonialism, or an economic relationship based upon subordination" (Tedlock, 2000, p. 466). Some researchers argue that indigenous ethnography may be

conducted by anyone researching their own community in which they are an indigenous (Tomaselli, et al., 2008), although Ellis, Adams, & Bochner (2011) opt to refer to this type of authoethnography as 'native ethnography' because it aims to study indigenous people from their 'native point of view'. The idea of the native point of view has been understood by anthropologists to be useful in the sense that it privileges authentic native experiences by legitimizing the ontological and epistemological views of the study group (Qamar, 2021).

Recently, anthropologists have divided ethnography into three genres: indigenous anthropology (defined as ethnography of one's own cultural group), ethnic autobiography (defined as personal narratives by members of an ethnic group), and autobiographical ethnography, defined as the anthropologist's personal experience conducting ethnographic research (Abdulrehman, 2017). Opponents of this categorization say that 'indigenous ethnography' is ethnographic research conducted by someone who is not a professionally-trained anthropologist but rather someone studies his or her home community (Reed-Danahay, 1997). Contrarily, Mji (2019) argues that an indigenous expert is a 'indigenous-born' ethnographer who has full knowledge of the indigenous culture he/she comes from and hence that makes him/her the authority of the knowledge. As someone who is both an indigenous healer and scholar conducting research in the culture I was born into and professionally operate in, I qualify this study as indigenous ethnography.

It is worthy to note that in anthropology, making a clear universal definition of what constitutes indigenous research is a challenge, and conducting research as an indigenous-born ethnographer does raise difficult epistemological and methodological dilemmas. This is because anthropology as a discipline was established by scholars who studied people outside of their own indigenous societies. These scholars were mostly of European descent and hence applied western epistemologies and methodologies in their explorations of cultural dynamics (Narayan, 1993). Recent studies however show that there is value in incorporating indigenous epistemology when conducting indigenous ethnography as by doing so, "dealing with contextual complexity and sensitivity with the author's indigenous learning, the author can use indigenous knowledge as a useful resource to investigate insider's perspective" (Qamar, 2021, p. 51). This raises the important question of what is 'indigenous' methodology and how does it differ from that which is 'native'?

Whitinui (2014) argues what constitutes a methodology as 'indigenous' is the use of culturally distinctive ways of coming to know that privilege indigenous understandings and

interpretations. The indigenous researcher therefore, is someone who is either indigenous by birth (indigenous to the land/native to the land) or who can connect genealogically to someone who is indigenous and can thus relate to the ontology and epistemology of the group (descended from the land). Linda Smith's work on decolonial methodology explains that historically, academic research has marginalized indigenous knowledge systems by portraying Western knowledge as objective and neutral, whilst misrepresenting IKS (and indigenous peoples) as devoid of empiricism. She asserts that academia's consistent push for "representations of 'native life' as being devoid of work habits, and of native people being lazy, indolent, with low attention spans, is part of a colonial discourse that continues to this day" (Smith L. , 1999, p. 54). In her work, she advocates for research that is grounded in Indigenous people's worldviews, languages, oral traditions, and cultural protocols as a means of challenging Western ideologies about indigenous life.

In the South African context, black people (of which Xhosa-speaking people are a part), can be classified as being both black and indigenous simultaneously (Canham, 2023). In his Mpondo theory, Canham (2023) reminds us that African indigenous studies are useful for thinking about blackness in Africa and hence in his analysis, to be African is to be both black and indigenous. I personally identify as a Xhosa-speaking indigenous researcher which makes me both black and indigenous. Hence, this study draws on the intersections of blackness and indigeneity as postulated in Mpondo theory by exploring the phenomenon presented by the identity of being both black and indigenous in the context of historical trauma experience.

5.3 Methods

This section will detail the *ukudidiyela* methods that were used in this study both in data collection and analysis. Data was collected through a variety of methods, including auto-ethnographic journaling and open-ended interviews with key informants. Discussions were conducted in isiXhosa depending on the comfort and language competency of the key informants, whereas all auto-ethnographic journaling was written in English. Notes from the discussions with participants was translated into English for the purpose of data presentation and analysis.

The anthropology of dreaming: using dreams as data

In the process of *ukudidiyela* (knowledge generation) for this study, I used dreams as sources of data. My own dreams were recorded in a personal dream journal, where after having received a lucid dream, I would practice a dream writing ritual that included lighting a candle and burning *imphepho* in order to share the dream. In the Xhosa language, this process is known as *ukulawula amathongo*. Traditionally, Xhosa-speaking people record information orally instead of through writing, hence dreams are usually shared verbally through story telling instead of writing them down on paper. I brewed an alternative version of the *ukulawula amathongo* ritual by sharing my dreams in written form rather than in verbal form as would be otherwise customary. Performing the *ukulawula amathongo* ritual in this manner allowed me to record the dreams as data in my journal so that I could be able to reflect on them at a later stage. In terms of the research participants, I did not require them to record their dreams in written text as some participants expressed discomfort with this approach. Instead, participants were free to verbally share the dream experiences that were of particular significance for them in their understanding of what constituted trauma in their lives. This meant that participants shared dreams that had played a key role in their understanding of their trauma and that facilitated major reconciliation events in their lives.

During the verbal dream sharing portion of the interviews, the participants and I would perform the *ukulawula amathongo* ritual by lighting a candle and burning *imphepho* together. As we chatted and shared dreams with each other, we would recite the phrase '*Camagu'*, which is a customary way of acknowledging someone's lived experiences and ancestors as valid. I recorded these dream experiences in my research journal as soon as the discussions ended to as to not forget any of the information shared, and care was taken in representing the dream experiences as they were recalled by the participants. Through the process of *ukudidiyela* of information in this manner, I was able to assert dream knowledge as text that could be presented and analysed as data.

The use of dreams as text has been widely accepted as a valid form of ethnographic data by anthropologists (Bird, 2005). In answering the question of can dreams be used as text, Kilroe (2000) asserts that indeed "all dreams are texts" however "not all dream texts are narrative" (Kilroe, 2000, p. 125). What she means by this is that a dream can be classified as text in the sense that it is a formal unit of data that has coherence and content. Simply put, dreams are text because they are units of information that carry content.

She further argues that although semantic criteria are usually applied in determining whether a unit of data can be classified as text, dreams as formal units of data do not necessarily need to have meaning in order for them to qualify as text. i.e. they can either be semantically empty or they can carry a message, either way, they are text because they are cohesive units of data that carry content that may or may not be meaningful. The message (and value thereof) of a dream "is the determination of which is made by the experiencer of the text", meaning that it is the dreamer that determines whether or not their dream has a meaningful message (ibid). It was with this understanding that I encouraged the participants to share the dreams that they personally felt carried meaningful messages in their lives. This way, it was not up to me as the researcher to determine whether or not a participant's dream carried meaning, this process was completely left to the participant to decide for themselves.

This understanding is encouraged by Mpondo theory, which asserts that the dreamer brews their own *amathongo*, and therefore the process of *ukudidiyela* in the context of determining meaning lies in the hands of the dreamer, unless they decide to consult with a diviner to help them determine the meaning of the dream (Canham, 2023). The methods of *ukulawula amathongo* that I used with the participants in this study did not involve me acting as a diviner to determine the meaning of the participant's dreams, but rather the participant had already had an understanding of their dream's message and therefore could share both the dream and its meaning with me as data.

Furthermore, Kilroe (2000) does make note of the fact that a text without message is useless as message is often synonymous with meaning, and therefore the great majority of dream texts will carry meaningful messages of some sort thus "we recognize a dream as a subjective text" (Kilroe, 2000, p. 125) This analysis is synonymous with that of Jung (1963) who argues that dreams are indeed text that may or may not be coherent, but the lack of semantic coherence can be the result of the dreamer not knowing how to interpret the dream but not necessarily that the dream is inherently devoid of meaning all together.

Additionally, Kilroe emphasizes that "the dream while it is being dreamed is experience, not text. Our memory of that experience, whether we report is or not, is the text of the dream", thus highlighting the notion that it is not the 'dreaming' process that makes the dream experience a text, but rather it is the memory and recollection of the dream that qualifies it text (Kilroe, 2000, p. 127). In the context this study, the *ukulawula amathongo* process was

used to qualify the participant's dream experience as text that was used to create narrative case studies that were then analysed.

According to Prince (1982), what qualifies dream experiences as narrative is the fact that they are reported as objects of enquiry either verbally or in written forms that have a beginning, middle and an end, giving them a time sequence. From this description, dreams can be classified as a type of narrative due to the fact that they are a series of events that are placed within time and context. This point of view contradicts with that of Hartmann (1996) who defines dreams as images rather than text. However, he does concur that there is a narrative element to dreams in the sense that they connect material to memories which can therefore be narrated as a story, making them valuable units of data.

Dreams have been used as narrative by some anthropologists such as Tedlock (1991), who argues that anthropology has seen a shift in the methods that are used to study the dream experiences of non-Western people, and hence "anthropologists are relying more on participant observation, in which they interact within natural communicative contexts of dream sharing, representation, and interpretation" (Tedlock, 1991, p. 161). Tedlock argues that this more nuanced approach to studying dreams allows the researcher to better understand the reality in which the participants are living in by taking into account the processes that go into cultural healing through the construction of self within the cultural contexts the participants come from (ibid). This is because it is within their cultural contexts that participants make sense of their dreams and the meanings emanating from them.

Laughlin (2011) contributes to this argument by stating that "the most common alternative state of consciousness among human beings is dreaming…Still, dreaming is a phenomenon of mystery and confusion for many Westerners, and of fascination to scientists wishing to understand how the mind works, both in terms of neuropsychology and within the context of culture**"** (Laughlin, 2011, p. 155). Both Tedlock (1991) and Laughlin (2011) affirm that since dreams are a common phenomenon, it is important that they be embraced as a research tool in anthropological studies that aim to study dream experiences within the context of culture, especially in cultures where dreams are highly valued as valid sources of information. The Xhosa culture is one that places high value in dreams as a source of information for healing, hence why I chose to utilize the anthropology of dreaming as a research method in this study.

By deciding to consider dream experiences as narrative, I was able to embrace the process of stepping out of the role of researcher and into the role of community member as I participated in the *ukulawula amathongo* rituals alongside the participants. Through the burning of *impepho* and the lighting of the candles, the participants and I were engaging in culturally-relevant ritual together, thus blurring the line between outsider (researcher) and insider (participant). This way of collecting data allowed me to challenge the notion that a researcher cannot be a participant in their own research, an approach that has been encouraged by some anthropologists.

Glass-Coffin (2010) has argued that "because ethnographers have begun embracing the value of stepping outside themselves and of being changed by the process, the tired assertions that anthropology cannot be good science unless the participant-observer remain detached from the cognitive and spiritual worldviews of their informants can no longer be accepted at face value" (Glass-Coffin, 2010, p. 206). As a researcher, I challenged the idea that in order for the data to be valid, then the participants and I as the researcher must strictly adhere to an insider/outsider paradigm. I acknowledged that throughout the study I as the researcher served as both an observer and a participant in the research, thus making me a tool in my own research. The 'researcher as a tool' approach is encouraged by Young & Goulet (1994), especially in cases where the researcher is someone like me, a person who is an insider that is doing anthropology at home.

The approach of challenging the insider/outsider paradigm required me to step outside of myself in order to understand the dream experience of the participants by being willing to be vulnerable in sharing my own dream experiences as part of the data collection process. The adoption of this approach is encouraged by anthropologists because it makes dream sharing "a prerequisite for, rather than an impediment to the production of ethnographic knowledge" (Fabian, 2000, p. 8).

Anthropology at home

Throughout the study process, I as the researcher performed anthropology at home by making observations of the naturally occurring events in my own life as an indigenous person and of those around me in my community, and provided an analysis of the phenomena occurring naturally without trying to control any of the variables as this would have destroyed the

phenomena being observed (Whitehead, 2004). In my use of the tenets of anthropology at home, I as the researcher was able to act as an instrument.

The concept of 'the researcher as the instrument' for ethnographic data collection has been widely acknowledged amongst qualitative researchers as it requires a high level of reflexivity (Pezella, et al., 2012). Due to the highly reflexive nature of this study, the approach of using the 'researcher as an instrument' was crucial as I was writing about experiences that I have experienced myself as well as observed what happen to others in my community. According to Bahrami (2015), the experiences and skills of the researcher, the ability to communicate and asking the right questions are some of the most important factors that validate the data when using this approach.

Additionally, as an indigenous Xhosa-speaking researcher, adopting this approach allowed me to experience a radical shift in the way in which I understood reality and my place in it within the Xhosa cultural context I was working in. Bernard (2010), who has studied the use of dreams within the Xhosa cultural context, agrees that this type of approach allows the researcher to fully engage in the cosmology of the study population and thereby allows the "self (the physical, spiritual and mental aspects) to be the canvas on which [to] explore their cosmology as well a key epistemological principle" (Bernard, 2010, p. 62). It is worthy to note that some of my own dreams that I presented as personal narrative in this study took place many years ago and throughout my life. Hence then, I make the argument that this type of radical participation as described by Bernard (2010) is not something that I started doing when I began this study, but rather it is a process I have been using throughout my life as an indigenous Xhosa-speaking dreamer who has been participating in the ontological and epistemological systems of her people.

This statement might be deemed as controversial by some, but it is important to note that detachment from the indigenous context, either completely or incompletely, is an impossible feat for the indigenous researcher who is studying her own dreams as well as the dreams of her community members. Goulet (1994) agrees with this notion and argues that ethnographers often find themselves immersed in societies in which dreams and the world of spirits is real and forms the foundation of reality, and that it is useful to incorporate these experiences in ethnography. Hence then, I found that incorporating Xhosa cosmology in my indigenous ethnography, whether consciously or unconsciously, was a reality that I could not escape.

Yes, of course, I acknowledged that there are both benefits and challenges associated with conducting research in a familiar setting, especially when I as the researcher was more of an insider than an outsider in the settings in which I was collecting my data. I do not see this dilemma as a challenge but rather as an opportunity that enriched my data. I was therefore doing anthropology at home, guided by my own extraordinary experiences and those of the research participants. The term 'anthropology of extraordinary experience' emanated from the works of Western-trained anthropologists who had experiences which fall outside of the range of what Western society tends to regard as 'normal', hence they called such experiences 'extraordinary' (Young & Goulet, 1994).

However, it is important to note that "experiences that may be extraordinary for Western-trained anthropologists may be commonplace for most traditional peoples around the world" (Young & Goulet, 1994, p. 7). Although the concept of receiving messages from dreams is a known reality amongst the Xhosa-speaking people of South Africa, it might not be a reality within the non-indigenous cultures some of my fellow anthropologists come from. The reason why I confirm this study as 'anthropology at home' is because I as the researcher originate from the study area, am a trained indigenous Xhosa-speaking health practitioner that specializes in trauma management and therefore I am familiar with the medical practises of Xhosa-speaking people, their ways of doing things, their understandings of their environment, their connection to spiritual beings, and the relationships they have with the natural environments of their land.

I am an 'insider' within this community and hence the impetus driving me as the researcher was not to make the participants appear as merely study subjects, but rather to portray them as co-researchers since they too participated in the data collection with me through the *ukulawula amathongo* rituals we performed together. Additionally, through this process, we were able to be in communal learning, growing, and stepping into spaces of more understanding with each other. In essence, we were doing the *ukudidiyela* process of generating new knowledge together, which within Xhosa cosmology is valid because 'brewing' in the Xhosa cultural context is something which is traditionally done in community.

Furthermore, my positionality as a member of the research group allowed me to fully engage in 'complete member research', thereby becoming a writer who is an insider that has also shared in the traumas that have been experienced by members of the study population. This

meant that I was not merely an outsider looking into document cultural understandings of trauma in Peddie but was rather a community member who has also experienced trauma in this region and thus carried shared understandings with the community. In this manner, the form of reflexivity showcased in this study does not fit neatly with the relations of producer-process-product as highlighted by Fabian (1979) but is rather a "more organic application of reflexivity in which I as researcher am self-conscious of my subjectivity" (Tomaselli, et al., 2008, p. 357).

Qualitative researchers Raheim, Magnussen & Blystad (2016) attest that the insider-outsider perspective in qualitative studies is not something new and therefore should and must be questioned when necessary. The authors state that the key importance of this technique is that it revolves around what it means to be an 'insider' or 'outsider' in a given study setting, and how the researcher's status is negotiated throughout the research processes (Raheim, et al., 2016). Throughout the data collection process, I had to keep adjusting my position according to the social interactions I found myself in. For example, during rituals held in my homestead, I had to be the daughter of the family, the young woman of the clan and the indigenous healer of the community. Hence then, my positionality as a researcher who is an insider was in constant flux throughout the study process, and this greatly enriched my *ukudidiyela* process.

Collecting data as an insider: Respecting community customs as a methodology

My methodology involved integrating a great deal of Xhosa cultural customs of community engagement as part of how I developed my data collection approach. I did this with the purpose of remaining respectful to the notions of ethical conduct with the cultural context I was working in. As part of the data collection process, I engaged with elders in my family and in the community as part of documenting their personal understandings of what constitutes trauma in the Xhosa-speaking context. The reason for doing so is because the indigenous Xhosa culture demands that the eldest members of the community be given the highest respect and dignity at all times by allowing them to lead healing rituals in times of illness. This makes elders valuable resources for understanding how trauma is conceptualized.

This process of paying respect to elders as valuable sources of information is culturally known as *ukuhlonipha*. The processes of *ukuhlonipha* that I used in the data collection process included holding discussions with selected key elderly participants in order to create

narrative case studies. The raw data included names of people and places as this was necessary in the detailing of the story for the sake of coherence, however in the version published in this thesis, the names of people and places are omitted due to ethical considerations and to protect the privacy of the people mentioned in the recollection of life history. In places where names of people or places are given in this thesis, these are pseudonyms used to protect the privacy of participants. It became very important to do this because indigenous Xhosa cosmology requires that personal relationships be respected, valued and not compromised, as the status of relationships greatly determines health and wellbeing as postulated by the indigenous Xhosa health model.

As a means of paying respect to the culture and to not disturb these personal relationships, I designed strategies that were intended to maintain trust and healthy relationships throughout the data collection process. These strategies included;

a. In the discussions with elders to gather more clarification around ritual and ceremony, I had to keep in mind that within Xhosa culture elders are not supposed to be drilled and questioned about their practices and levels of understanding as doing so symbolises disrespect and creates the impression that the elder's knowledge is being doubted. This meant that I had to be cautious of not demanding answers as this was not culturally appropriate. Instead, when dealing with both the elders of my clan and of the community in general, I took the role of being a daughter seeking advice from her parents/elders. It needs to be emphasized that instead of asking individual-based questions, I enquired about community knowledge or collective clan knowledge as means of respecting the elder's knowledge and boundaries. Elders were free to share whatever experiences they felt comfortable with.

b. Informants for this study included me, as well as key participants. I along with the participants, gave narrative accounts of traumatic experiences**.** To construct participant narratives, I engaged in interviews with each key participant in private conversations about their understandings of trauma and how in their own lives they have experienced and managed trauma. Data from these interviews was recorded on my notebook after the interview as participants expressed a discomfort with being recorded because the experiences they were sharing were deeply emotional, and hence more culturally appropriate methods of data collection had to be adopted in order to remain sensitive to their feelings. Additionally, May (2019) in her exploration of

Bomvana indigenous healers, found that some participants regard the use of recorders and dotting down of notes during interviews as culturally foreign and takes away from the human-to-human interaction of a conversation. For the sake of data validity, notes were taken immediately after the interviews to not lose any important details.

c. In terms of respecting community customs as part of the methodology, I took into consideration that within the Xhosa cultural context, the ancestors are also considered to be members of the community and hence respect also needed to be extended to them as well during the research process. To construct the case studies that pertain to my own individual experiences, I offered personal narrative of my own clan's trauma experiences and how dreams served to reconnect us to landscape during our family times of trauma and crisis. Part of the methodology included me visiting these sacred sites as instructed by my ancestors in my dreams in order to gather knowledge about how to heal my family from the trauma we were experiencing. The custom of *ukuhlonipha* had to be adhered to at all times during my visits to the sacred sites. The *ukuhlonipha* custom greatly dictates how a female is supposed to dress and act in the community as well as in the vicinity of sacred sites. For the visits to the sacred sites, I, being female, developed strategies for adhering to *ukuhlonipha*. These included:

1. I wore long dresses that covered my legs when visiting sacred sites and when performing ritual. The dress code also included me covering my shoulders with either a scarf or shawl.
2. Custom dictates that when visiting a sacred site, ritual offerings ought to be given as a sign of respect to the ancestors and spiritual guides of the sites. I offered foodstuffs as well as coins and beads according to what was requested from me by my ancestors and spiritual guides.

This meant that through practising *ukuhlonipha* in this manner, I was serving as both a healer and a researcher simultaneously by being both a participant in the phenomenon and an observer of the phenomenon. This dualism meant that I could fully be engaged in the creation of knowledge and the collection of data simultaneously. I thus make the argument that in utilizing the space of ritual at the sacred sites, the ancestors and I as community members were thus creating knowledge together through the process of *ukudidiyela*. From a data collection perspective, these rituals were held at the river, the ocean and the forest and

thus provided a first look glance at the indigenous health strategies utilized by Xhosa-speaking indigenous healers in the management of trauma. During the visits, I did not record any of the material via Dictaphone or camera, as it would have been considered disrespectful to the ancestral spirits that were being beckoned. For the sake of safeguarding the integrity of the data, I used field notes to document the visits and what occurred during the rituals.

Community knowledge as pedagogy

Scholars of African philosophy such as Mbiti (1969) and Ngubane (1963) define a community as a group of people with a shared identity or interest that has the capacity to act or express itself as a collective. Under this definition, a community may be territorial, (i.e., determined by a specific geographic space); organizational, (i.e., a structured entity such as ancestral spirits or clans); or interest based, (i.e., defined by a shared goal such as preservation of a medical knowledge as is the case with the traditional healers). Throughout this thesis, any reference to "community" may apply to any one or more than one of these types of communities. Throughout this study, I as the researcher was aware that I am an 'insider' in the community under study, who however is using an 'outsider' academic framework in her attempts to understand the extraordinary experiences described in this study. The awareness of this dynamic allowed me to be more sensitive to the unequal power dynamics that I was bringing in as somebody who is affiliated with a Western knowledge-based university and hence as someone who has access to western resources that the rest of my community might not have such as a higher education and financial support. This self-awareness was crucial in accounting for the inherent bias that came with such a positionality.

To account for this power dynamic, I made it a priority to use Xhosa community knowledge as pedagogy that guided my methodology. I did this with the understanding that it is important for researchers to learn about and to respect the customs and ethical codes of conduct that apply in a particular community. Understanding how to interpret and apply them may depend on the depth of the relationships established with the community, and hence it is important to develop trust-based relationships with members of the community before, during and after the research process. In indigenous communities, elders and other knowledge keepers may have an important role to play in the design and conduct of research, and the interpretation and dissemination of findings, hence it is important to consider their involvement beyond data collection.

For example, in this study, I as the researcher had to keep in mind that it is against custom to question the knowledge of elders and therefore in my study design, I had to brew strategies that allowed me to engage the elders in conversation without diminishing their authority, whilst allowing them to offer critical analysis of the information that was being shared. This included avoiding certain lines of questioning and by giving the elders space to offer their insights about how trauma should be studied. This meant that I as the researcher had to let go of the illusion of being the all-powerful knower from the university and give in to the humility of being a daughter learning from her elders as is culturally expected in the Xhosa perspective of what it means to receive an education.

Throughout the research process I deeply immersed myself in the cultural and community knowledge of the study population by fostering deep relationships built on trust and mutual respect. Researchers in the social sciences agree that community engagement also involves fostering deep and transformational interactions between the researcher and the community under study (Denzin & Lincoln, 2011). Since I as the researcher was doing anthropology at home in my own village and within my own family and clan, determining the nature and extent of community engagement was a joint undertaking between myself as the researcher and the relevant community members. I did this by considering certain community characteristics and the nature of the research itself.

In the case of my age and gender, I took into consideration that as a young woman participating and sometimes leading in ritual spaces that are usually reserved for men in the community might present a challenge for some of the community members. Hence then, I resolved this by consulting with the men separately prior to my participation in said ritual so as to avoid conflicting power dynamics that might inadvertently create an illusion that the women of the community are disrespectful to customs. I made sure to be careful that my individual behaviour could not be viewed as a reflection of the rest of the women in the community. That is, I had to find a way to be an insider member of the community, while also being an independent researcher who was to be held responsible for her own actions without having those actions be regarded as a reflection of overall community values.

Adhering to the cultural ethical codes of *ukuhlonipha* allowed me to navigate this conundrum, hence I claim that throughout the study I utilized community knowledge as pedagogy. The approach of utilizing community knowledge as pedagogy has been encouraged by Lackey & Dersham (1992) who argue that “people’s knowledge and skills are

increased by becoming involved in community activities and the greater their involvement, the greater the learning. The process is the teacher!" (Lackey & Dershem, 1992, p. 220).

5.4 Researcher positionality

As being part of the community under study, I naturally immersed myself in the culture of my people and throughout my life learned how to become a member of the community by learning how in the Xhosa-speaking indigenous setting people behave, interact with others and reflect on events of the day. Xhosa-speaking people have their own system of neatly designed, tried and tested methodologies of engaging people in group spaces, teaching the young as well as ways of participating in family or community gatherings (May, 2019).

Xhosa society expects the younger members of the family or community to participate in the activities of the household such as cooking, cleaning and looking after the livestock as a means of learning. In this indigenous education system, teachings are experimental and practical, carried by word of mouth and not written down (Ohajunwa, 2019). This is the indigenous Xhosa concept of receiving an education (Mji, 2013).

As part of my Xhosa indigenous education, I had to learn these indigenous practices of asking questions and collecting information to observe how people share space and communicate with one another. I learned from my parents, family members, elders, ancestors, by attending community gatherings and by actively participating in cultural activities such as ritual and ceremony. Because I as the researcher was born into the culture that I was researching, my indigenous ethnography is a form of reflexive ethnography and can thus be described as 'reflexive indigenous ethnography' where I was the phenomenon of study.

In this study, I used reflexivity as a methodological device of which I as the writer was mindful. My embodying the identity of complete member researcher (Alder and Alder 1987) is consistent with a "trend that has developed amongst social scientists who have begun to view themselves as the phenomenon and to write evocative personal narratives specifically focused on their academic as well as their personal lives" (Tomaselli, et al., 2008, p. 357). This is done by researchers with the primary purpose of understanding the self or some aspect of a life as lived in a cultural context (Ellis & Bochner, 2000).

Although my research employs methodologies from different branches of ethnography, such as indigenous ethnography, complete member research and personal narrative, the work itself does not always neatly fit textbook categories but rather overlaps between all these branches of ethnography, and in doing so also blurs the neat distinctions between the associated methodologies. This thus allowed me to 'brew' *(ukudidiyela)* new ways of doing indigenous ethnography within the cultural context I was working in.

5.5 Data analysis

By definition, "in simple terms, phenomenology can be defined as an approach to research that seeks to describe the essence of a phenomenon by exploring it from the perspective of those who have experienced it" (Neubauer, Witkop, & Varpio, 2019, p. 91). By "examining an experience as it is subjectively lived, new meanings and appreciations can be developed to inform, or even re-orient, how we understand that experience" (ibid). The hermeneutics of phenomenology allow for scholars to learn from the experiences of others (ibid). Drawing from Strathern (1991), I as the researcher attempted to document the anthropological knowledge that emerged from this research by utilizing the dialogical anthropology approach, where the voices of the participants were prioritized as part of my journey of documenting their trauma narratives.

Geertz (1973) argues that it is in this 'shared communicative world' that ethnographic practice can be the most revealing about other people's experiences of the world. Throughout the course of this study, the methodology I used as a researcher moulded and shifted as it was further informed by indigenous Xhosa ethics of engagement, that are based on mutual trust and connection between community members. This approach is referred to in the community as *'ukuphathana ngembeko'*, loosely translating to 'treating each other with respect and dignity'. As an insider, my approach to studying the anthropology of trauma within my own community was guided by the concept of *ukuphathana ngembeko*, which embraces being present and listening, negotiating and verbalizing the understandings of the trauma experiences being shared.

This approach allowed for me to cultivate a mutual understanding between myself and the participants, which as Murphy states, "plays a significant role in field situations where an ethnographer is dealing with suffering" (Murphy, 2015, p. 95). I had to remind myself frequently that although I could not wholly understand the participants' individual

experiences, but as a fellow indigenous person with similar shared experiences of trauma, I could walk alongside the participants by bearing witness to their stories and by retelling as much of their experiences as I possibly could. In this way, the methodology could allow for the participants to also walk alongside me as I worked through my own trauma as a member of the affected group. I found myself developing a sense of shared responsibility between myself and the participants in that we shared each other's stories with one another as a means of healing each other through storytelling, an indigenous methodology for healing pain that has been used in our culture for generations.

This approach, as utilized by Murphy in her ethnography of Aboriginal trauma survivors in Australia, conceptualizes stories as gifts, which like all gifts, "compel recognition, acknowledgement, and instantiate an ethics of responsibility" (Murphy, 2015, p. 96). Therefore, my ethnographic research was grounded in mutual Xhosa indigenous understandings of the ethics of shared communal space, which requires the acknowledgement of mutual relationships and worldviews. As part of the storytelling process, the participants and I would say *'Camagu'* (peace be with you) to each as a means of mutual recognition of each other's suffering and the acknowledgement of the shared culture and worldview we come from. In this way, I could assume a posture of 'healing with' my research participants through the use of storytelling and cultural practices. This approach was particularly important for me as an indigenous Xhosa-speaking researcher who was developing an ethical methodology for writing and representing my fellow indigenous Xhosa-speaking people's lived experiences.

As Murphy states, "the ethnographer of traumatic experience must follow a middle way between engaged listening and a careful balanced witnessing that is both respectful of one's research participants and generative of a critical scholarly understanding of those very experiences" (ibid). Heidegger (1962) argued that within the context of shared consciousness, people and the world are indissolubly related in cultural, in social and in historical contexts. From this understanding, I could develop an indigenous-informed methodology of studying the trauma experience of Xhosa-speaking people from a space of shared consciousness that is grounded in mutual understandings of Ubuntu and the ethics of engagement that come with *ukuphathana ngembeko*.

5.6 Ethical considerations

In this study, the consent process involved respecting key fundamental ethical points; 1) the ethical duty of confidentiality, 2) The type of information to be collected, and 3) protecting privacy involving secondary use of information. Below is a detailed explanation of the considerations that I used in the development of the methodology of this research.

Ethical duty of confidentiality

The ethical duty of confidentiality refers to the obligation of an individual or organization to safeguard entrusted information (Denzin & Lincoln, 2011) . This duty is essential to the integrity of the research and to the relationship of trust between researchers and participants. In addition to this ethical duty of confidentiality, I as the researcher was also bound by national legislation and cultural rules that protect the privacy rights of indigenous people in South Africa. As part my duty of confidentiality, I informed participants about what type of information I was going to be collecting, who will have access to it, how it will be protected, and how it will be used.

The type of information collected

To facilitate the process of confidentiality**,** I placed limits on the use, disclosure and retention of information by utilizing pseudonyms to refer to participants. Therefore, in the process of the research for this study, risks to participants were considered should the security of the data be breached, including risks of re-identification of individuals. Hence, appropriate security safeguards for the full life cycle of information were introduced, including not using any recording of observations such as photographs in the research that may allow identification of participants**.**

Protecting privacy involving secondary use of information

Secondary use research relies on information originally collected for a purpose other than the current research purpose. There are several reasons why a researcher may want to use such information, for example, to corroborate or criticize the conclusions of the original project, or to confirm the authenticity of the original data (Denzin & Lincoln, 2011)**.** As a researcher, I utilized information that had been collected by my family in group scenarios such as family rituals and ceremonies. I as the member of the family did not partake alone in the creation of

this knowledge, but rather, I worked alongside my family members and community to create this knowledge.

An example from this study is where certain rituals were performed in my family unit, in which I was a participant, but were either not performed correctly or parts of the protocol was not followed. As a healer myself, I had access to the tools of assessing the validity of the knowledge that was being applied during those rituals and therefore could criticize the conclusions that were made or to confirm the authenticity of the knowledge that was being applied. From the perspective of participants such as my family members, one important reason to base a research study on secondary use is to avoid duplicating unnecessarily the inconvenience and risks associated with ritual such as financial inconveniences and risks of upsetting the ancestors. Hence then, instead of repeating certain rituals and ceremony that had already been performed by my family for the purpose of collecting data, I utilized the data that was already collected by the family unit. Ethically, this serves to reduce the burden on participants and thus minimizes risk.

Additionally, in this thesis I refer to specific events that took place within my family unit as part of data collection and presentation. For this study, such data is secondary information which can either be non-identifiable information or identifiable information. In the cases where the information was identifiable, information could not be coded as it was relevant to the telling of the story. Due to the conundrum presented by my identity as an insider doing 'anthropology at home', it was therefore important for me to distinguish between identifiable and non-identifiable information, to determine whether it is necessary to seek the consent of the participants for secondary use. In cases where consent was necessary, individuals were consented before data could be collected and thus presented in this study, and adequate measurers to protect their privacy were taken.

Intimate others and the sharing of family stories

In *Telling Secrets and Revealing Lives*, Ellis (2007) argues that when researchers tell stories of close family members in their research, it is important to keep in mind the concept of relational ethics which is closely linked to the ethics of care. Ellis defines relational ethics as doing what is necessary to be true to one's character and responsible for one's actions and their consequences on others.

Additionally**,** she argues that relational ethics require us to work from our hearts as in the process of telling our stories, we also inadvertently tell the stories of others. Freadman (2004) argues that self-revelations always involve revelations about others. So, when we write about intimate others that are alive, we have an opportunity to discuss with them what to tell and what is comfortable to tell. In my data presentation chapter, I presented stories about my family's experiences with trauma and family violence. I utilized the concept of relational ethics as stipulated by Ellis (2007) and Freadman (2004), by consulting with my family members and asking for their consent to tell the story as part of my data. We agreed on what details of the story are to be told that are relevant for the study, and information that was not relevant was excluded. It was important that I received permission from my family members since I make mention of their participation in my narrative, the fact that I am narrating stories that took place in my family also inadvertently involves them in this research. In instances where I had to refer to deceased family members, permission was granted by the living members of the family.

The ethics of sharing traumatic experiences

Murphy reminds us that in trauma research, "through stories and their representation we can do violence to those we study and work with through our written expression" and that "anthropological theorisation can delegitimise and violate the experience of suffering even while we openly engage with the voices and stories of our research participants" (Murphy, 2015, p. 98). She argues that researchers run the risk of imposing their own scholarly theories on the real experiences of other people, and that this can "attenuate the very experiences we wish to illuminate" (ibid).

To avoid categorising suffering and those who suffer, Murphy suggests that the researcher should ask themselves what is at stake for the participants due to the fact that the risk of mis-representation in an already charged political landscape where stories of indigenous people's suffering have sometimes been commodified and mis-appropriated (Murphy, 2011). She further encourages the researcher to consider that there will be those participants who see healing in the telling of their stories, and as such it is crucial that as ethnographers of traumatic experience, we retain forms of sustained communion that commit to an ongoing, engaged dialogue with our research participants.

As a member of the community, I as the researcher continued to engage with my participants about the research process throughout the duration of the study and how I myself as an indigenous person was healing along with my community through the sharing of my own experiences. This approach allowed for a sense of healing communion to be established between us so that the sharing of traumatic experience does not evoke feelings of isolation and despair. As Murphy explains, "this is ultimately a very fine tight rope, one we must thread on carefully, in order to bring equilibrium to our representations of voice, story, traumatic experience, and emotion in such difficult fieldwork settings" (Murphy, 2015, p. 99).

Application of ethics principles

Approval for the study was obtained from the Rhodes University Human Ethics Committee (Ethics reference #: 2021-5208-6397). The ethical principles of the Declaration of Helsinki, the South African Guidelines for Good Clinical Practice and the Medical Research Council (MRC) Ethical Guidelines for Research were adhered to. Issues of intellectual property, respect for persons and justice pertaining were respected by asking for consent prior to interviews. Trauma studies, while potentially eliciting some emotional distress, generally involve minimal risk for participants (Murphy, 2015). There was minimal risk associated with participating in this study, but I kept in mind that some participants might feel uncomfortable retelling stories that caused them distress and trauma, including myself. For that reason, I remained alert and sensitive to the participants' needs (and my own) and requests in any way that maximized their comfort (and my own). It was explained to participants that their responses would be translated into English solely for the purpose of presenting this study so that they did not feel like their indigenous language was being undermined or misrepresented. I did not pay the participants to partake in this study.

In terms of application of relational ethics between myself as the researcher and my ancestors during the research process, I applied a few strategies to mitigate the power dynamic presented by the co-ownership of knowledge and intellectual property rights. These included: 1) developing a combination of clear agreements by means of transparent communication protocols. I achieved this by engaging in a process of *ukuphahla* throughout the research process, which is a spiritual communication or meditation intended to connect the physical world with the ancestral realm and seek guidance. This is aided by the burning of *imphepho* (Helichrysum) to create smoke, which acts as a medium for the communication. During the

communication process, I would acknowledge the ancestors from both my maternal and paternal sides of the family, thereby creating a shared sacred space.

The secondary strategy I utilised involved a process known culturally as *umnikelo*. This is a culturally recognized form of offering made to the ancestors to show respect and to seek guidance thereby maintaining the vital spiritual link between myself as the living kin and the ancestors as the living-dead members of the family. The specific items I offered depended on the specific request and preferences of the ancestral lineages. An example of this is when my Gqunukhwebe Khoi ancestors requested an offering of milk and honey to be made on my next visit to the Kariega River, where I usually swim and bathe for maintaining my wellbeing. This river was historically on the lands of the KhoiSan who were displaced during the arrival of white settlers into the area that now encompassed Kenton-on-Sea, Bushman's River and Boknes (Hirst, 2009). On the days when I went bathing or swimming at the river, I would make an offering of milk and honey to honour my Khoi ancestors. This process assisted in developing a research methodology that included indigenous cosmologies in the process of communication between myself and the ancestors, as well as with research participants who participated with me in burning *imphepho* as a form of 'ukuphathana ngembeko', loosely translating to 'treating each other with respect and dignity' during the data collection process.

5.7 Challenges experienced during the research

The Xhosa-speaking people of the Eastern Cape are a patriarchal society, with women being expected to follow the laws of *ukuhlonipha*, which dictates how a woman is supposed to act, dress and move in spaces, often limiting her movement and access to certain spaces. I tried my best to uphold and respect this cultural law, but with immense difficulty. As a modern woman raised in democratic South Africa, I was constantly under scrutiny for the manner in which I spoke, dressed and engaged in spaces where I was the youngest female person in the setting. This scrutiny impacted me emotionally and psychologically as I often found myself having to defend myself and my rights to express my opinions. There were instances where relationships became tense between myself and certain family members who felt that I was refusing to adhere to their demands of how I should behave. This challenge was also revealing in the sense that it deepened my understanding of gender relations within the research community and how new norms of gender relations may conflict with existing ones, further generating cycles of trauma.

Additionally, I am an indigenous healer who specializes in trauma management, and hence already came into the research with my own understandings about how trauma is managed within the Xhosa cultural context. This fact posed a challenge because as a researcher who is also an indigenous healer, my role in the research process was multi-dimensional because I was conducting research within an indigenous health system that I am a part of. Hence, my being an indigenous healer myself made me inherently laden with biases which might have affected my analysis of the data. However, I acknowledge that these so-called "challenges" might have also acted as opportunities to enrich my data as they allowed me to think more clearly about certain dynamics of human relationships that supported the methodology.

5.8 Conclusion

This chapter served as the methodology portion of this thesis. Key critical ontological and epistemological aspects that pertain to the research topic were addressed by describing in detail the methods that were used and for what purposes they were chosen. This chapter also presented ways in which these aspects were challenged in times when it was necessary to do so, and how new epistemologies were integrated into the research process. Doing so is crucial especially in studies of this nature which seeks to make a case for the inclusion of indigenous knowledge systems in the study of trauma in South Africa. The next chapter will present and discuss the data collected from this study.

CHAPTER 6: Dreams and ancestral communication as sources of information for managing trauma

Nkonjan' emnyama, ngubani na lo ugulayo?

Nkonjan'emnyama, ngubani na lo ugulayo?

Mna ndiyazigulela (ngubani na lo ugulayo?)

Ndiyazigulela (ngubani na lo ugulayo?)

Yinzonzobila, yinzonzobila (ngubani na lo ugulayo?)

(Black swallow, who is sick?)

(Black swallow, who is sick?)

(I am sick)

(I am sick by myself)

(It is a tragedy, a big tragedy)

(Black swallow, who is sick?)

6.1 Introduction

The song above is known in isiXhosa as *Inkonjane emnyama* (the black swallow), and it was given to me in a dream during a difficult time in my *ukuthwasa* process to become an *iGqirha*. My journey of becoming an *iGqirha*, which began in 2015, was extremely traumatic. I became a victim of sexual mistreatment and abuse in the hands of my trainer, and this greatly affected me psychologically as I often found it difficult to manage the trauma. The ancestors blessed me with this song during that tough phase and instructed me to sing it whenever I was healing myself (or others). Despite the challenges, I eventually graduated and became an *iGqirha* in 2019 but was called again in 2021 to become an *iTola*.

The second calling was much gentler and allowed me to better understand (and heal) the trauma that I carried from the *ukuthwasa* process. The ancestors blessed me with this song because the black swallow is a sacred bird in Xhosa cosmology due to the fact that it is a migratory creature which leaves its nest to travel the world to acquire knowledge from its experiences. It is also a bird that always returns to its original place of birth to pass forward the knowledge it has acquired to the next generation of swallows. Hence, when we ask the black swallow "who is sick amongst us?", we are acknowledging that the swallow is a creature that carries knowledge because it too as a being has experienced the ups and downs of life and thus has learned how to navigate its way through those challenges. In a way, the *inkonjane* operates like an ancestor, that is, it goes away to other parts of the universe but always returns home to its nest to share its knowledge for the benefit of the next generation.

By sharing this song with me, the ancestors were teaching me how to look at pain from the perspective of the black swallow. That is, in life we all must leave our nests to explore the world and when we encounter pain, we must be able to return home because that is where we will find the knowledge of how to heal ourselves. It is from the wisdom of the *inkonjane emnyama* song that I was able to formulate the narrative case studies presented in this chapter. The stories of pain that are presented here reflect the ways in which the study participants understood their trauma from their perspectives and how they engaged with Xhosa healing cosmologies as a means of regaining wellbeing. Thus, this chapter offers the reader an opportunity to understand how within the Xhosa cultural framework human suffering is interpreted and reconciled.

Each participant's story is presented in the form of a 'narrative case study', which is a qualitative research method that involves collecting data from individuals about a specific life event (or a series of events) that occurred, and then retelling the story, whilst also highlighting the ways in which the individuals have learned from their experiences. Narrative case studies are used to study social and clinical problems, understand stages in processes, and investigate phenomena within their environmental context (Brandell & Varkas, 2010). In the construction of narrative case studies, data is collected through a series of loosely structured interviews over time, with the purpose of focusing on the construct and expressions of the story as experienced by the research participant (ibid). I chose to present the study data in this manner to highlight both the trauma experiences and the strategies that were used by the participants to manage and reconcile their pain. In total, seven narrative case studies are presented and discussed in this thesis. Case studies 1,2,3 and 4 are presented in this chapter, while case studies 5,6 and 7 are discussed in Chapter 7. The case studies are presented under thematic

frameworks that explore similar themes and ideas. Presenting the case studies this way helps to organize and analyze the narratives according to the patterns emerging from the data.

In the first case study, I present my personal journey of how I mitigated my trauma throughout the process of doing this PhD as a Xhosa-speaking person who had been diagnosed with posttraumatic stress disorder, depressions and anxiety. I also detail the processes that I underwent to become an *iTola* healer and the dreams that guided me through the process, as these experiences informed this PhD. It is fitting that the first narrative case study to be presented be that of my own trauma as doing so sets the tone for the rest of the chapter.

The wisdom of the *inkonjane emnyama* song guided me throughout the struggles that came with the journey of being a healer who was pursuing a doctoral degree whilst dealing with her own trauma. This chapter reflects how in the Xhosa cultural context, ancestors and spiritual guides act as beacons of knowledge, wisdom and guidance throughout one's life. In the second case study under this theme, I present the case of a participant who received a calling from his ancestors to practice as a diviner. In his practice, he utilizes dream sharing narratives as a way of retrieving lost information through communication with his ancestors. He then uses the information he receives from his dreams in the process of mending broken family relationships through ritual. Both case studies serve to examine the importance of dreams in Xhosa cosmology as a means of knowledge generation for the purpose of healing trauma.

The third case study explores how disruptions in kinship can lead to trauma and what strategies are used to manage such trauma. The case study examines how anthropologists have approached the study of kinship and its fundamental role in shaping Xhosa society and cultural practice. It is important to note that this case study examines how kinship terminology is used within the Xhosa cultural context to trace ancestral relationships through descent and how these relationships influence wellbeing. The fourth case study explores the complex notions of relatedness beyond genealogy and takes into consideration the role of marriage in exacerbating trauma within the family unit. Issues relating to witchcraft are explored to examine how anthropologists have sought to understand the duality of good and evil in shaping family conflict.

Thematic framework 1: ***The Role of dream sharing narratives and ritual in the process of healing from trauma.***

Case study 1: My personal journey of *ukuthwasa*

I pray for you Africa

I mourn for you Africa

I wish I could be with you Africa

I am mad because I love you Africa

These are words I wrote in my journal in 2022. At the time, I was suffering from depression, PTSD and anxiety disorder. I felt extremely vulnerable and overwhelmed with grief. It had been a year since I moved to Makhanda to pursue my PhD studies. Upon my arrival in Makhanda, I experienced challenges with adjusting to the move. This affected my mental and spiritual health. I had underestimated how difficult it would be to be away from my homestead, where I had my *indumba* and medicines.

An *indumba* is the sacred shrine that indigenous healers use to connect to their ancestors in the Xhosa tradition. It serves as a space of healing and divination. Mine is a traditional mud hut where I keep my ancestral relics and precious ceremonial attire hung on the walls. Relocating to university meant that I had to leave my ceremonial relics behind because the apartment I was renting at the time was not big enough to accommodate all my belongings. I was on a student budget and so I could only afford a small space that had a bed, kitchenette, bathroom and bedroom. There was no extra space for setting up an *indumba* that would be a complete replica of the one I had at home.

However, I did try to create a make-shift prayer space in my rental apartment to satisfy my need to connect to the ancestors. I turned the apartment fireplace into a prayer shrine, where I contacted my ancestral spirits using *imphepho*, music, tobacco and candles. Setting this up at the fireplace was ideal because the apartment had smoke detectors so any significant amount of smoke stemming from the burning of the *imphepho* would set it off. It was also in this prayer shrine that I contacted ancestral spirits I am not related to by blood but that reside in Makhanda. This came as a shock since in my *indumba* it was only the ancestors from my blood lineage that contacted me. I found this strange, but I also understood that I was now performing a ritual in a space that did not belong to me and thus this could open avenues for the ancestors of that space to come through. The first spirit of Makhanda to visit me in my dreams was a white Christian man.

In the dream, he was wearing a black Anglican church robe and wore a white collar. He stood near a bridge that separated the church building from the rest of the community. He seemed unhappy as if he had been trying to get his point across for some time. He spoke in isiXhosa and asked me "Why don't you go to church anymore?".

I did not answer him because I was baffled by this visit as this was my first time being visited by a Christian ancestor whom I am not related to by blood. To try to make sense of this visit, I contemplated going to the Anglican cathedral, but I did not quite feel comfortable entering that space yet. It took me a week after having this dream to make it to the cathedral. Eventually, when I got there, the chapel felt cold, spiritually distant and empty. I did not enjoy the experience of being there at all. I felt like an outsider that did not belong in that space, which was strange because I was raised Anglican and my father is an ordained member of the Anglican clergy. I knelt to pray with my *itshoba* in my hand. An *itshoba* is a sacred stick made from wood and the tail of a sacrificial cow. Traditional healers who have completed their training are given an *itshoba* made from the sacrificial cow at their graduation (Bernard, 2010).

I started to pray and to invoke the spirits of my ancestors by *ukuzinqula* (the process of calling out my clan names as a means of veneration). As soon as I did that, my body started to shiver, and tears fell down my eyes as if I was going into a trance state. At that moment, the church organist had walked in and started to play a piece on the organ. The music calmed me down because as someone who was raised in the Anglican church, the organ had become a familiar musical instrument. I felt a deep sense of connection to the music and the echo of the sound made in the empty halls of the chapel. It felt as if the organist could sense I needed comforting of some kind. I collected myself, listened to the organist play his set and then exited the chapel.

The visit to the cathedral shifted a lot of things into my spiritual space, although I could not make sense of it all at the time. Soon after the visit to the church, on one of the nights I prayed in my make-shift apartment shrine, I was visited again by a Christian spirit that I did not have familial relations to. This time it was not a white man, but rather a white woman with short grey hair.

In the dream, her spirit led me inside the same Anglican cathedral where I had gone to pray after my visitation from the spirit of the white male Christian ancestor. She led me past the prayer hall and into a small office room that looked like a vestry at the back of the altar. In this room there were traditional healer prints of various designs. These prints are referred to as amahiya and are worn by traditional

healers. There were lion, leopard, flower and sun disk prints all over the room, but all were in three colors only - red, white and black. The woman introduced herself as Jane, and she herself was wearing clothing made from these traditional prints, although they were in an Anglican fashion. Hanging on the wall above the desk of the office where she was seated were amaGqirha sacred sticks, such as amatshoba, imvubu, umnqayi and umkhonto. They looked very similar to the ones I have as an initiated iGqirha. We settled down in this small office space and started to chat. She informed me that she comes from the United States and has been sent to help me become a member of the Anglican clergy.

I was surprised by her revelation as there was never a time where I had wished to become a part of the Anglican clergy as far as I could remember. I asked her "What should I call you?". She replied, "call me Mfundisi". In isiXhosa, Mfundisi is a term meaning Priest or Spiritual teacher. It stems from the Xhosa term 'ukufundisa' which means 'to teach'. She then proceeded to tell me that she and I have been connected by what she referred to as the "Universal Ithongo". She mentioned that this 'Universal Ithongo' wants us to co-operate and work together to bring healing to the spirits of the Makhanda area through my PhD. Outside of the office room where we were conversing was seated one of my closest friends. She seemed anxious and, in a hurry, to leave the cathedral. Jane looked at my anxious friend and said to me; "You are going to lose friends over this, and you will often feel alone". Those words sent chills down my spine because it was not the first time I had been told by the ancestors that my path would be lonely and friendless. As soon as she said this, my friend left and walked away from the cathedral. I did not feel an inclination to follow her or wonder where she was going. I did not want to know why she was leaving either. Jane instructed me to speak about this encounter between herself and I, starting first with the Anglican church leadership.

A few days went by, and I did not go down to the church to visit the church leadership as she had advised me to. I was scared and unsure of how the church would receive me, especially considering how tense the historical relationship between Christianity and indigenous religion had been in South Africa. In all my years of being in the Anglican church, I had never heard discussions about traditional healers and the ancestors held in the church in a healthy manner. On the third day after receiving her message, I fell physically ill. I started to feel weak, tired, and struggled with my breathing. My monthly menstruation hadn't stopped and was getting heavier. This worried me a great deal because in Xhosa cosmology, heavy menstruation is associated with disturbances in ancestral relationships (Padmanabhanunni, Jaffer, & Steenkamp, 2018).

I set up an appointment with a local biomedical doctor to stop the bleeding. Upon meeting, he and I clicked immediately. There was something about his spiritual presence that I liked which I had not felt from my previous consultations with biomedical doctors. He was gentle, kind and warm-hearted. He asked me how I was doing as is the regular procedure for biomedical consultations, and strangely enough I felt comfortable sharing with him what had been happening to me physically and spiritually. It surprised me how safe I felt with him regarding my spiritual matters. Usually, I feel apprehensive about sharing my spiritual experiences with biomedical doctors out of fear that they will not understand. Even worse, I fear that they might ridicule me or make me feel stupid.

However, I had a completely different experience with this doctor. He was surprised when I told him about my dream experience with Jane because he knew her personally. He mentioned that she had been one of his patients while she lived in Makhanda. They also knew each other from church since he is also an Anglican. A couple of weeks went by after my visit with the doctor. Although the heavy menstrual bleeding had been resolved, I still struggled with my mental health. To alleviate my depression, I met for coffee at the local coffee shop near campus with one of my PhD supervisors. As we were chatting, I suddenly received a loud ring in my ears. I usually interpret this as a sign that the ancestors are present. After about 45 minutes into our conversation, I politely asked my supervisor to be excused as I deeply felt a need to go to the Anglican cathedral. My supervisor offered to drive me there, but I turned down the offer. I felt that I needed to walk there instead.

As I walked towards the cathedral, I ran into a group of Khoi people moving towards the grocery store near the cathedral. It turned out that this group of people were the Gonaqua royal family. Upon seeing them, I was overwhelmed with emotion, and I went into a trance state in the middle of the street. People were peaking and starring, but the group was kind and assisted me through the trance by saying *Camagu* several times. At that moment, I did not quite understand why I was so extremely emotional. It turned out, after we had made our introductions, that the Gonaqua delegation was related to the amaGqunukhwebe kin group that my paternal grandmother came from. The amaGqunukhwebe are a mixed tribe of Xhosa and Khoi that was formed prior to the Frontier Wars of 1779 to 1879, specifically during the reign of King Tshiwo of the Rharhabe Kingdom (see Chapter 1). The royal delegation informed me that they were in Makhanda to meet with the mayor. They were attempting to reclaim their ancestral land, which happens to be the land on which the Anglican cathedral is built. We exchanged numbers and promised to stay in contact.

As I reflected on this experience in my journal, it became clear to me that my ancestors wanted me to walk in that direction so that I could meet my grandmother's kin. I felt humbled and honored to have been given such an experience. After the meeting, the Gonaqua royal family included me in their communications platform and started sponsoring my Khoi language lessons. A week after meeting them, I decided to travel back home to my village homestead. Before leaving Makhanda, I asked the ancestors to accompany me home to get a better understanding of what had transpired in the past few weeks. Upon my arrival at the homestead, I went directly into the kraal to let the ancestors know that I had arrived and would be staying for the entire weekend. In the early evening of my arrival, I was overwhelmed by a deep desire to sleep and so I went to bed. I had a vivid dream that night.

In my dream, I saw the Gqunukhwebe ancestors of my paternal grandmother's clan, the Sithathu. They were accompanied by a very large, beige-colored dog. The dog was large enough that it could crush a car with its paws. When the Sithathu ancestors entered the homestead, the accompanying dog reduced in size to the size of a regular dog. The Sithathu ancestors entered the house, but the dog stayed outside on the veranda. The visit felt strange in that the Sithathu ancestors did not seem happy. As soon as they arrived, they abruptly left and took their dog with them without having engaged in any discussions. When they exited the homestead, the dog became enlarged again.

When I woke up in the morning, I felt saddened by this visit and my mood was low. As I was making breakfast, my brother informed me that during the night he was woken up by the aggressive sound of barking dogs. He said that he went outside to check what was going on. He found our family dog biting another dog violently on the back. He said he had no idea how this strange dog got into our yard because we have a fence and a locked gate. I intuitively asked him about the color of the dog. He said it was beige in color. I was in shock and wondered whether the dog he had seen was somehow related to my dream. I was left with an extraordinarily strong feeling that indeed there is some tension being between my Xhosa ancestors and my Khoi ancestors but as they did not give any explanations, I could not pin-point the exact cause of the tension. I raised the issue with my father, but he did not seem interested in pursuing it any further, so I decided to drop it.

It was now the 26th of April 2022, and I had returned to Makhanda from the village homestead. On this night, I received a vivid dream where we as a family were having a joint ceremonial gathering at the great family homestead. In Xhosa culture, the great homestead is the ancestral home of the family. Usually, the original home of the paternal grandfather or great-grandfather of the family. For the month of May 2022, my family had planned to host a *ukubuyisa* ceremony for my father's deceased eldest

brother. Invitations had already been sent out to relatives, friends and neighbors announcing the upcoming ceremony. *Ukubuyisa* is a ritual where an ox is slaughtered by the living kin for 'bringing back' the spirit of a deceased male family member so that they can rejoin the spiritual spaces of the homestead (Mtuze, 2004). As I had previously mentioned, my father's mother came from the Sithathu clan of the amaGqunukhwebe.

In my dream, the ancestral hut in which the ukubuyisa ceremony was to be held was filled with people from the Sithathu clan, mostly women but a few men were also present. They were crying and in deep distress. I saw myself comforting them by telling them that they need to perform a ritual cleansing so that the women of the Sithathu clan can regain good health, physically and spiritually. In the dream, one of my Sithathu cousins came close to me and lay on my lap in deep distress. I rubbed her head to calm her down. The female ancestors spoke to me and said "banikeni indebe", which translates to "give them a share". In the dream I saw myself offering the Sithathu clan members meat, umqombothi (traditional beer) and tobacco. I then spoke to them and said "kuzolunga, nizophila", which is translates to "all will be alright, you will be healed".

I shared this dream with my close relatives, and they agreed to accommodate their Gqunukhwebe kin on the day of the *ukubuyisa* ceremony. And indeed, on the day of the ceremony, the Sithathu side of the family was given a share of the *umshwamo* (meat, traditional beer and tobacco) as the ancestors had requested in my dream. The family sat down for a meeting, and we spoke about how the strains and rifts in the kinship relationship had started to take a toll. We exchanged apologies and vowed to make efforts to reconnect with each other and to mend the strained relationships. Upon reflection, I felt relieved that the strain had been addressed and that the relationships were being mended. It felt that I had completed the task the ancestors had asked of me, which was to revive the kinship between the two lineages.

Following the ceremony, I returned to Makhanda to continue with my academic writing. In the following weeks after the *ukubuyisa* ritual, I had another vivid dream.

In the dream, I was back in my village homestead. My indumba was heavily damaged and infested with rats and unidentifiable creepy creatures, some of which looked like venomous insects of some kind. I was too afraid to walk into the indumba, instead I stood by the door and looked in. I saw my iGqirha regalia, beads and sacred animal hides on the floor. Everything seemed damaged. I asked my older brother to go inside the indumba for me to get my belongings off the floor. He went in and took everything out as I waited outside. All my regalia, beadwork and blankets were infested with these

creepy creatures. My mother's brother was in the homestead as well, as well as my dad's older sister. They both told me that an iGqirha must not live far away from her regalia, sacred hides and beads and that I should travel back home to the village to get my regalia, particularly my head gear called an isidlokolo, and bring them back with me to my apartment in Makanda. I noticed that the foundation of the indumba was damaged in the front side and a huge gaping hole was by the door, where the rats and creepy creatures were entering.

I woke up from this dream feeling sad and scared. I understood this dream instruction to mean that the ancestors felt abandoned by me since I had moved elsewhere and left the regalia behind, and that they were now coming to fix this issue. That same week I travelled home to the village homestead and brought my regalia to Makhanda to be with me. I hung it above the fireplace where I had made a make-shift prayer shrine.

For months following this move, I had intense dreams where I was being taken underwater by mermaids. My mental health was deteriorating. Having dream experiences that I did not understand exacerbated the issue. I informed my family about the struggles I was having, and they suggested that we meet with an elder in the community who would be able to give us advice on what to do. My family and I consulted with an elder who explained that the dreams meant that I have a calling from the water spirits to become an *iTola*. He explained that an *iTola* is someone who connects all the various clans and ancestral lines within the family bloodline to bring about peace and reconciliation where kin relationships had been broken. He advised that my father must take me into our family kraal and talk to the ancestors and ask them to reveal who my *iTola* mentor is supposed to be so that I can begin my training and the work of bringing together all the various ancestral lines of our bloodline. Following my father's plea in the kraal, I received a vivid dream.

In the dream, I saw myself swimming in a mermaid pool with a group of mermaids. As I looked up, I saw a big waterfall cascading down these two beautiful mountains that were covered in lush vegetation. Everything looked green and luscious. There was a winding road from the top of the mountain to the bottom of the valley, where I had been swimming in the mermaid pool. A car was driving down the road towards the direction of the pool. As the vehicle came closer, I saw my brother driving the car. He presented me with a traditional cloth that had a lion print on it in the colours white, red and black. He got back into the car and drove away. The mermaids helped me to put the cloth on whilst telling me that the lion is a totem animal for my family. One of the mermaids had long brown hair. She showed me how she uses her hair to catch fish to eat in the water. She used her hair as a fish net to catch crabs, small

fish and other crustaceans. She told me that in the underwater world, they eat only seafood and that when I return to land, I must not eat any seafood as it is the food of the water people. She instructed me to go seek the help of an iTola healer from the Mbamba clan in kwaBomvana and he will assist me to connect to the water realm whilst I am on land.

I shared the dream with my family and again we consulted the elder about what it meant. The elder advised that I must do as the dream suggested and not eat seafood and try to locate the healer from the Mbamba clan. During my master's research, I stayed in kwaBomvana. In the village I had stayed there is a neighbourhood that is known as eMabambeni, named after the Mbamba clans that live there. I had made friends in the area during my stay there, so I decided to call one of them and ask them if they knew of any *iTola* healer from the Mbamba clan. My friend suggested I talk to the older Mbamba family members and ask them. He shared the number of a lady that lives close to his house who is a member of the Mbamba clan. I shared the dream with her and asked if she knew of any *iTola* healers in her family that could assist me. She told me that there is only one *iTola* healer in her family in the area and she offered me his name. I recalled meeting this man as part of my master's research study. She shared his number with me, and I gave him a call and told him about the dream. He still remembered me from the time I was conducting my research in the area. He suggested that my family and I travel to kwaBomvana to meet with him so that we can discuss a way forward regarding my initiation. A few weeks later, my father and my uncles accompanied me to his homestead in Bomvana where we discussed the next steps of the process of initiation. It was decided that I would be taken to the ocean and be initiated there. It was agreed that my family would come back to fetch me on the fourth day.

On the day of the initiation ritual, we woke up early at the break of dawn to go to the ocean. The healer brought along a bottle of brandy, tobacco, R1 coins, white beads, a billie can and *ubulawu* herbs. When we arrived at the ocean, the healer made the offerings with the items we had brought with us, except for the *ubulawu* as he was going to bathe me with that. After bathing, he instructed me to speak to the water and recite the dream that brought me to him. As I spoke, a white fish jumped out of the water in front of us. The healer told me that the initiation was complete, and I had indeed been accepted by the water people. He told me that from now on moving forward, water would be my spiritual element. The ocean would be my shrine where I will make prayers to connect to the water people that have given me the gift of *ubuTola***.** We left the ocean and went back to his homestead. He instructed me to call my family to let them know that the initiation was complete and that they can come to fetch me. The next day my father and uncles came to fetch me from the Mbamba homestead to take me home. I had officially

become an *iTola* and could now start the work of reconciling the broken relationships in my kinship group, as well as to assist other families in the community who were facing similar struggles.

My personal narrative emphasizes how dreams played a crucial part of my getting to become a knower and a healer through the process of initiation. It is well documented that those chosen for *ukuthwasa* receive messages in dreams, serving as a precursor to their initiation into the world of ancestral healing and divination. Upon accepting the calling revealed in their dreams, these individuals enter a period of initiation and training under the guidance of their mentors. The initiation process involves rituals, ceremonies, and teachings aimed at preparing the initiates for their roles as healers and spiritual intermediaries. Through this intensive training, initiates learn the traditional healing practices, rituals, and ethical codes necessary to carry out their duties with integrity and respect (Burhmann, 1986) (Mutwa, 1996) (Sodi, et al., 2011). This case study showcases how in Xhosa cosmology, dreams, spirituality and ritual are used in the process healing broken kinship relationships. These dreams and rituals can play a key role in resolving intergenerational conflicts within the family unit. For this purpose, *ukuthwasa* can serve as both a process of healing and of knowledge generation.

Hirst (2005) argues that much of the dream practices observed in the context of Xhosa culture include the intentional seeking of specific dreams through practices aimed at influencing dream content so that whatever situation needs to be healed can be addressed effectively. In my personal experience of becoming an *iTola*, my dream initiation involved me experiencing what is culturally known as *ukubangwa*. This process entails a deep initiation that often presents itself through vivid dreams that involved otherworldly beings as sources of guidance. Establishing communication with these beings requires a rigorous set of rituals to be performed.

The *ukubangwa* phenomenon is culturally understood to be a physical manifestation of the desire of the ancestors to have their knowledge reproduced in the living kin generation to assist in times of critical instability within the family or community. Someone who is experiencing *ukubangwa* is often required to “fukama” at multiple sacred sites where the ancestors of the family are known to reside. In my case, I underwent *imfukamo* at the sacred site where my family ancestors reside, which was the ocean. By being asked to *fukama* in this manner, my ancestors were directing me to participate in the creation of knowledge as it was from this ritual that I received information about what the next phase of my training should be and the path I should follow in my spiritual journey.

Since *ukuthwasa* is deeply rooted in a structured spiritual calling and initiation process, dreaming plays a crucial role in the process as potential indigenous healers seek to understand and decipher the symbolic language of their dreams. Through the sacred realm of dreams, individuals are called to embrace their ancestral legacy, connect with the spirit world, and fulfil their destiny as healers and custodians of traditional wisdom (Kubeka, 2016). The symbiotic relationship between dreams and *ukuthwasa* highlights the intricate interplay between the physical and spiritual realms, underscoring the enduring significance of ancestral communication and guidance in the lives of the Xhosa-speaking people. That interplay includes the processes of self-discovery and healing from one's own trauma as well.

Research that has been conducted on the cultural use of spirituality amongst indigenous communities in South Africa reveals that through dreams and paying attention to the messages conveyed by the ancestors, indigenous South African people seek guidance, protection, and blessings in their daily lives (Cumes, 2013). Throughout the various indigenous cultures of South Africa, dreams are not only seen as a form of communication with the ancestors but also serve to maintain a strong connection to one's cultural heritage and identity.

According to Mfusi (1984), this role is two-fold in the sense that 1) dreams establish a direct relationship between the dreamer and certain supernatural forces and beings that are considered to have an independent existence, thus allowing the individual to acquires a creative sacred power, and 2) the indigenous practitioner can utilize their sacred power to make analyses of such dreams in order to affect a client's diagnosis (Mfusi, 1984). This research shows that by interpreting dreams and engaging with the messages received, individuals can gain a deeper understanding of themselves, their place in the world, and their responsibilities to their families, ancestors and community.

Therefore, we can ascertain that amongst indigenous people, dreams are considered a reflection of one's innermost thoughts, emotions, and desires, as well as a manifestation of the collective consciousness of the community (Goulet, 1994)**.** In the personal narrative I have shared, dreams also help one identify where there may be rifts that have occurred in ancestral (intergenerational) history that need attending to through ritual action. They raise awareness for the living of where the source of problems may be and guide one as to how to resolve them. The problems might arise from kin conflicts, ancestral neglect and lack of acknowledgement of various ancestors.

The church dream experiences I had with the two Christian spirits that visited me helped me to identify the ambiguity between being raised in a Christian home whilst also having an ancestral calling to become a healer. In my own family, Christianity has played a key role in the breakdown of close family ties in the sense that some of my close relatives used their Christian beliefs as a means of refusing to participate in crucial family rituals that were geared for maintaining the family's overall wellbeing. This tension created a trauma for me as I was often accused of witchcraft by these family members since I was the person in the family whom the ancestors primarily communicated with via dreams. As it currently stands, I have not yet fully reconciled my relationship with Christianity as I have not been back in church as a full practising member. This is primarily because we as a family have not reconciled our strained relationships. The family remains divided between the devout Christians and those who practice indigenous spiritualty. This lack of resolve has made it difficult for me to feel at peace within the church. I think this internal conflict will remain a part of my reality until the situation in my family has been reconciled and the broken relationships mended. Until then, the church will remain a source of pain for me.

Additionally, Christianity has historically played a key role in invalidating indigenous spirituality, including the *ukuthwasa* process of initiation (Mlisa, 2009). As someone who was raised Christian, I have insights as to how my devout Christian relatives might misconstrue my initiation process as invalid. In one of the discussions I had with my relatives, they expressed confusion around process of *ukuthwasa* through dreams. They presumed that the use of dreams in receiving information that can be applied in the waking world is not grounded in reality. This sentiment has been used by rejectors of African spirituality in both historical and contemporary times.

Mtuze (1999), himself a Christian reverend and academic scholar explains that this rejection is deeply grounded in a superiority complex that portrays western concepts of validating information as superior to African ones. Considering that Christianity was introduced to South Africa by Westerners, it is generally considered a part of the Western school of thought. The conflict between the Western school of thought and African school of thought can result in conflicts within kin groups (Pauw, 1975). The conflicts caused by my initiation within my family is one of those examples.

Regardless, dreams are generally accepted as a valid form of initiation by the majority of Xhosa-speaking people. This is because dreams are believed to be a powerful tool for communication with the spiritual realm and for gaining insight into the past, present, and future (Hirst, 2005). Booi (2004) clarifies that the journey of *ukuthwasa* is indeed dream-based in the sense that those that are called

dream so that “they can understand and interpret their messages, which appear in the dreams” (Booi, 2004, pg. 3). She further adds that certain contextual differences can impact how Xhosa-speaking people experience and interpret their dreams. In Xhosa society, people understand the maintenance of stable human relationships to be a spiritual act which can greatly influence the types of dreams a person has (ibid). That is to say that Xhosa-speaking people have a holistic view of human relationships, which means that an individual is intractably linked to others through family, community and ancestral relationships. This creates a situation where the living and the dead are interlinked, and where dreams can act as a pivotal point of communication between the two worlds.

Kilianova (2010) supports this notion by claiming that in various indigenous cultures, dreams about ancestors or deceased relatives are perceived to be a means of communication between the living and the dead to convey messages, warnings, or explanations or to simply ask for help. In my personal experience with dreams, they have been a source of information pertaining to the resolution of strained kinship relationships as well as for facilitating my own personal growth. Although certain kinship relationships remain strained and have not been resolved using dreams, there have been many instances where dreams have assisted in the mending of kinship relationships in my family. This showcases the complexity of the application of healing cosmologies in the management of trauma, as at times these methods may not produce the desired result due to the complexity of the trauma that has occurred. Hence it is important that we do not romanticize the use of dreams as their efficacy in resolving trauma can be affected by many factors.

Besides my own personal experiences with dreams, participants in this study also shared their own experiences of how dreams have shaped their spiritual journeys and healing practices. The story shared by the participant in the following case study showcases how ancestors appear in dreams to convey messages about how family members should live in a manner that sustains kin relationships while supporting younger family members with learning these core positive values. As the participant acknowledges, the ancestors can reveal through dreams when there is a disturbance in the kin relationships. As shown by the strategies he uses in his healing practice, the receiving of dreams builds goodwill and maintains good relationships which are vital for wellbeing. As the case study showcases, dream practices play a crucial role in Xhosa cosmology. They serve to seek guidance, healing, and wisdom through the interpretation of dreams thus shedding light on their significance and the cultural beliefs that underpin them.

Case study 2: Mpondo's story

This case study presents the story of a male healer from the Peddie region, who in his spiritual practice works with his female ancestors to bring reconciliation in families where relationships have been strained. He was born and raised in the outskirts of a town in the OR Tambo District Municipality of the Eastern Cape. He now resides in Peddie, where he works as an indigenous healer that specializes in retrieving lost information through dream practice. He does this through consultation with his female ancestors that guide him through the process of interpreting the dream messages.

It was raining heavily the day Mpondo was born. His mother was alone in her homestead with no husband to help take her to the hospital. She called out to her neighbour and friend next door, an older woman who was also a traditional birth attendant. This was the year 1983 and very few indigenous people in the rural areas had access to transportation services or even ambulance services. So Mpondo's mother and her friend had to stand in the rain, waiting and praying a kind stranger to give them a life to the hospital. Their prayers were answered as a kind-hearted man who owned a bakkie took pity on the women and stopped to give them a ride. They explained to him that they were headed to the hospital as Mpondo's mother was experiencing labour cramps. The two women arrived at the hospital and Mpondo was born in the backdrop on a rural village hospital made wet by heavy rainfall. When Mpondo was a toddler, his mother passed away and he was left in the care of his *dadobawo* (father's sister).

When the time came for him to get an identity document so that he could register for his grade 12 examinations, he found that he did not have a birth certificate. Sitting for the grade 12 examinations required that all students have an identity (ID) booklet. Since he did not have a birth certificate, he could not apply for the ID booklet. He enquired from his aunt about the reasons he did not have one and she explained to him that his mother never handed over the birth documents to the family after his birth. The application was never made with the authorities because they could not locate his certificate after her passing. So, he then decided he would have to go apply for a new birth certificate. However, there was a problem, he did not know his birth date. His aunt knew of the birth year, suspected that it was in the month of February but had no idea what the actual date was. She guessed that it was the 2nd of February but was not fully certain. Amidst the chaos of trying to figure out his birthdate, Mpondo had a vivid dream.

In the dream, he saw an old woman who introduced herself as his grandmother. She told him that he was born in January not February and on the 3rd not the 2nd as his aunt had guessed. She then proceeded to teach him how to read palms to determine a person's birthday.

When he woke up from his dream, he shared the news with his aunt. His aunt was amazed by this revelation and shared the news with an older male relative who suggested that the family try to locate Mpondo's mother's friend who had accompanied her to the hospital to confirm the birth date. Luckily, the woman still resided in the village and was approached by Mpondo's aunt. The woman confirmed that indeed Mpondo was born on the 3rd of January 1983. She said that she could never forget the day because it was the heaviest rainstorm she had ever experienced in her life and that the journey of assisting her friend to the hospital was an epic tale that as a traditional birth attendant she still recalled vividly.

After having received confirmation of his birth date from the traditional birth attendant, Mpondo and his aunt went to the Home Affairs department and applied for his birth certificate and subsequently his identity document, which meant he was able to write his grade 12 examinations and matriculate from high school. He now has a stable job as a security guard and is the primary breadwinner in his family. Even to this day, Mpondo is a gifted palm reader, a gift he credits to his grandmother for teaching him. It is from this backdrop of his life journey and his grandmother's visit in his dreams that Mpondo was initiated to become a healer.

Mpondo's training

Mpondo was trained and educated by his ancestors through dreams. He recalls having dreams every night since he was a teenager in high school and in these dreams, he would receive knowledge and training. In his words, "mna ndathwasa ngendlela eyohlukileyo kwabanye abantu ekuhlani. Zange ndiphehlelelwe ligqirha, ngaphehlelelwa emathongweni nkokhokho bam" *(I did not thwasa in the common way that other healers do in my community. Rather, I experienced ukuthwasa through dreams from my ancestors).*

The main ancestor that appears in his dreams is a female ancestor whom he refers to as 'Makhulu' (grandmother). He recalls that he was instructed by his Makhulu to not share the exact details of his practice since it is highly sacred. However, he did share certain general elements of his work, and they are detailed below.

Mpondo's scope of practice

Mpondo is the type of healer that works by addressing family relationships by working with spirits of the mothers (and grandmothers) of the clan. These spirits are referred to as *Amanono* spirits (the feminine divine). He explains that the *Amanono* spirits teach him about holding kinship relations together through the maintenance of healthy kinship roles, citing that the *Amanono* ancestors work on the premise that disrupted kinship roles lead to disrupted family relationships which subsequently lead to illness. He expressed this sentiment by stating that "amanono ahlanganisa inzala yekhaya za kuthe konakala imvisiswano phakathi kwekhaya. Ukonakala kwemvisiswano kudala ukugula, ngoko ke, amanono alungisa izinto ezinjalo" *(The amanono ancestors bring together their descendants in cases where relationships have been broken because this can result in illness if not addressed. Breakdowns in family relationships can lead to severe illness within the family unit).*

As evidenced by his own journey, the *Amanono* ancestors act as the custodians of kinship knowledge through the retrieval of lost knowledge, thus can assist in situations where kinship roles are disrupted. When knowledge of such roles has been lost, Mpondo and his *Amanono* ancestors are able to assist by teaching and rebuilding these roles within affected families. He cites many reasons as to how kinship roles can be lost within a family, such as the disruption of indigenous family structures through the migrant labour system that destroyed many indigenous families during the apartheid era. He states that "iindlela zokulahlelwa kwemvisiswano ekhayeni zohlukile. Kodwa ezona zibalulekileyo zezi zifana nokulahlekelwa ngabantu abakhulu abanolwazi ngeendlela zokufa okanye zempangelo kude kunekhaya" *(There are many ways that relationships can be broken within a family. But those that are the most common are the loss of elders through deaths due to disease or the relocation from homesteads for work purposes).*

As Mpondo suggests, elders play a vital role in the maintenance of healthy relationships within the family unit. When they are lost either through death or migrant labour, these can result in a void within the family that can possibly compromise relationships. His description of these key relationships that play a crucial role within the family unit are summarised as follows.

1. **uTata** – the father (the groom). Within the homestead, the father is the primary provider for the family. He can have multiple wives if he chooses but it is his responsibility to take care of his wives and children. He is also responsible for looking after the livestock and the general

wellbeing of the homestead. He is also responsible for passing on the family's cultural knowledge about rituals and customs to his children.

2. **uMama**- the mother (the bride). Within the homestead, the mother is responsible for the child rearing and taking care of household chores, such as cooking and cleaning. The home's vegetable garden is usually the mother's responsibility. She is responsible for educating the children about the domestic affairs of the homestead such as gardening, cooking and medicinal herbs that grow in the family garden.
3. **Abantwana**- the children.
4. **uMakhulu**- the grandmother. Within the homestead, the grandmother is often the groom's mother as it is often taboo for the bride's mother to stay with her daughter's in-laws. *uMakhulu* is responsible for teaching the bride the rules and customs of the household, hence making her a valuable knowledge holder. She is also often the primary health provider when sickness falls upon the family. If the family is polygamous, there might be multiple grandmothers in the homestead, but usually the groom entrusts his own mother with his wife and children.
5. **uTa'mkhulu** – the grandfather. Within the homestead, the grandfather is the groom's father. He is the family patriarch and is consulted on important family matters such as marriage, building new houses on the homestead and ritual and ancestral communication. As the family patriarch, he presides over all ancestral rituals, making him a valuable knowledge holder.
3. **uDadobawo** – great aunt/sister-in-law (groom's sister). Within the homestead, *udadobawo* is responsible for assisting her mother with planning and co-ordination of family ceremonies and rituals.

In her own birth home, the *dadobawo* is a daughter however, in her marital home she is a wife. In her birth home she has more freedom of movement and can enter the sacred kraal where ancestral rituals are performed, things that she is forbidden to do in her marital home. As the daughter of the home, she plays a crucial role in maintaining healthy relationships and in resolving conflicts. The importance of *udadobawo* is expressed in songs that are sung during times of uncertainty and tension.

Dadobawo, ndicel'amandla (great aunt I ask for strength)

Dadobawo, ndicel' umsebenzi (great aunt I ask for work)

4. **uTat'omcinci** – the paternal uncle. The *tat'omncinci* is the groom's younger brother and therefore plays the role of his confidant and supporter. If unmarried, he assists his brother with the running of the household and in all spiritual matters concerning the household, but if married, then he is expected to run his own household.
5. **uMam'omcinci** – the paternal uncle's wife. The *mam'omncinci* is usually the youngest bride in the homestead and as a result, she is expected to take direction from her husband's older brother's wife, her mother-in-law, and her sister-in-law.
6. **uMalume** – the maternal uncle. The *malume* is the bride's brother and he remains at the bride's birth homestead to take care of his parents. It is tradition that when he marries, his wife will move in with him and his parents to the family homestead where they will raise their children.
7. **uMakazi** – the maternal aunt. The *makazi* is the bride's sister. If unmarried, she is expected to stay home with her parents in their homestead, but if married then she can move out and go stay with her husband's family.

Mpondo explained that these structures allow for resources to stay within the patrilineal family (agnatic) whilst also allowing for movement within the community. Resources such as cattle enter a family with the marriage of the daughters and leave the family with the marriage of sons through the process of *lobola* (bridewealth). It is custom that a man pays bridewealth to his bride's family to marry her, thus allowing for the movement of resources within the community. Traditionally, the daughters are the ones who move out of their birth homes when they get married, whereas the sons are expected to stay at their family homestead and bring in their wives to join the family.

As Mpondo explained, this system allows for the patrilineal inheritance of resources as well as the patrilineal survival and passing on of customs, rituals and traditions. Dowry is what the bride's family pays to the husband's family (typically found in places like India), *lobola* is the Nguni version of the bridewealth system. It is the disruption caused by the forces of colonialism, apartheid and modernity on this complex Xhosa kinship system that are often the bed root of contemporary family conflicts (Krige & Comaroff, 1981).

How the disruption of knowledge flow can affect health and wellbeing in a family according to Mpondo

Mpondo explained that the kinship roles also play an important role in the passing down of knowledge across generations. When this information is lost, it can have negative consequences on the wellbeing of

the family members, citing that "ikhaya lima ngolwazi lamasiko nezithethe. Xa olulwazi lulahlekile, kubanzima ekhayeni ngoba amayeza ekhaya aphela engaziwa yinzala yekhaya. Lento ke iza neengxaki ezininzi, nje ngengulo, ilishwa kunye neengozi" *(Families are built on ancestral knowledge. When that knowledge is lost, things become difficult in the family because the medicines and rituals of the family also become lost. This can give rise to many problems, including illness, misfortune and trauma).*

He explains that it is the role of the older generation to teach the younger generation about the customs, rituals and traditions of the family which can contribute to healthy households such as *amayeza ekhaya* (the medicine of the home) and *amasiko nezithethe* (the rituals and ceremonies of the home). His description of these terms is given below.

Amayeza ekhaya

Mpondo explains that the "medicine of the family" refers to the plant-based remedies that are inherited from the ancestors of the patrilineage and that have been passed down from generation to generation through the oral traditions and rituals of the group. Examples of *amayeza ekhaya* include *ubulawu*, which is used to invoke ancestral dreams so that information can be transmitted from the ancestral realm to the living kin. The use of the wrong *ubulawu* can affect the ability for the living kin to communicate with their ancestors, resulting in broken relationships between the ancestors and their living descendants. This breakdown in relationships can have a negative effect on the wellbeing of the family. As he explains "iyeza lekhaya liyimpilo lelokhaya. Xa kuthe kwabakho impazamo, kwasetyenziswa iyeza elingafanelekanga, isihlwele asivuki ngendlela efanekileyo" *(The medicine of the family holds the wellbeing of the household. If a mistake is made and the wrong medicine is used, then the ancestors cannot reawaken properly).*

Amasiko nezithethe

Mpondo explains that each family has its own rituals that it uses to maintain healthy relationships with the ancestors. For example, during the *imbeleko* ritual, which is conducted to introduce a child to the family ancestors, some families use a goat while some use a sheep. He explains that the use of the incorrect animal can have detrimental consequences on the health status of the child. Hence it is important that the correct animal be used and sacrificed in the correct manner. When such knowledge is lost, entire families can suffer from illness because the incorrect knowledge has been applied during ritual.

Mpondo explained that Xhosa people come from various clans and thus it is important that families practice the knowledge of their respective clans to ensure that the proper health strategies are utilized. He explained that in his family they a part of the Mpondo clan and therefore must perform the rituals of the amaMpondo according to the knowledge systems of the group. If they were to utilize the ritual systems of the amaHlubi for example, then that would disrupt the flow of knowledge from his Mpondo ancestors to the Mpondo living kin. Therefore, rituals are a way of documenting information across generations. In his work with the *Amanono* ancestors, he ensures that families utilize the correct information in their health management.

The retrieval of lost information through ritual practice

Mpondo shared a scenario where he had to utilize his skills of retrieving lost knowledge to address trauma-related conflicts in his family. He shared that in his family there used to be conflicts between the men and the women of the clan, often leading to resentment and strife. This strife had negatively affected the family during times when they needed to gather for healing rituals. He was directed in a dream by his *Amanono* ancestors to perform a ritual known as *ukuhlanganisa izihlwele* meaning 'the bringing together of the ancestors' to reconcile the family conflicts. He was instructed to visit each of the family's sacred sites to offer tobacco and beer in the presence of his family members. He gathered his cousins and started on the quest. The family had lost the knowledge of the exact locations of these sacred sites, so he was led in his dreams by his ancestors to the locations.

Upon arrival at the sites, he made the offerings. Each one of his family members that were present made a prayer to the ancestors, asking for reconciliation to dawn upon the family. He and his family members acknowledged that the ritual was a success because the level of conflict in the family has since subsided. This is evidenced by the family's ability to gather for ritual without quarrelling. He asserts that his family has become a more peaceful space. The family also visits the sacred sites before they start a ritual, citing that "phambi kokuba sisebenze umcimbi, siyakwazi ngoku ukuyokunyathela ezinkudleni zekhaya sicele uncedo lwesihlwele sethu, into ibikade isixabanisa ngaphambili" *(Prior to us performing a ritual, we now are able to visit the sacred sites of our lineage to ask the ancestors to guide us through the process, something that used to cause friction between us before).*

As Mpondo explains, the process of communicating with his ancestors through dreams has allowed for the sacred knowledge that was lost to be returned to the family, thus resolving the family conflicts in the process.

Mpondo's story showcases how dreams can possibly act as a tool for the retrieval of lost information in cases where disrupted kinship roles lead to strife. As evidenced by his personal experiences, conflict between members of the clan lead to resentment which negatively affects the family during times of performing healing rituals. This compromises the health and wellbeing of the family. His use of dream technology allows him to navigate these challenges so he can foster reconciliation for the sake of maintaining wellbeing within the family unit.

According to Kilianova (2010), various cultures around the world use dream technology to retrieve information through the process of intention setting before sleep. Additionally, meditating at sacred sites and engaging in rituals to invite dreams can offer solutions to problems, offer insights into the future, and improve communication with ancestors. These dream incubation practices demonstrate the active engagement with dreams as a sacred and transformative experience throughout the indigenous cultures of the world (ibid).

Hirst (2000) explains that Xhosa-speaking people incubate dreams by using *ubulawu*. It is a plant that is understood to open channels through which ancestors communicate with the living, offering guidance, warnings, and insights that are essential for navigating life's challenges. He asserts that in Xhosa-speaking communities, dream incubation practices are often carried out by individuals seeking answers to personal or communal concerns such as health issues, relationship problems, conflicts and disputes, or decisions regarding the future (ibid). Mpondo's work with dreams falls into this category.

Additionally, Xhosa-speaking people believe that family members who have passed away are not completely gone but instead exist on a different plane of existence. Consequently, dreams are seen as a sacred space where the spiritual realm intersects with the physical world, allowing for a direct connection with the ancestors who continue to protect their living kin.

Schweizer (1992) notes that ancestral communication through dreams is deeply rooted in the lives of Xhosa-speaking people because the ancestors play a crucial role in the maintenance of the wellbeing of clans, of entire communities and of sacred sites in the environment. In this context, dreams from the ancestors are revered as mediators between the living and the divine since the "interaction between the ancestor-person and the dreamer is significant" (Schweitzer 1992, pg. 77). It is believed that the ancestors possess a wealth of knowledge accumulated over generations, and they are willing to share this knowledge with their living descendants through dreams (ibid). Mpondo's story serves as attestation to this notion.

Dream interpretation is one of the key healing modalities that plays a crucial role in managing health amongst Xhosa-speaking people. In Mpondo's case, he receives his entire scope of practice through dreams. This makes him an expert in dream interpretation. As he explains in his narrative, at times these dreams carry messages about certain rituals that need to be performed to resolve a particular problem. Therefore, the dream interpretation service offered by spiritual practitioners plays a vital role in helping individuals make sense of their dreams, navigate life's challenges, and maintain harmony with the spiritual world (Edwards, Makunga, Thwala, & Mbele, 2009).

Based on both Mpondo's and my own personal experiences, I argue that it is through the process of *ukuthwasa* that healers get to participate in the generation of new knowledge for their own personal healing and the wellbeing of their families and communities. This is because it is through the process of *ukuthwasa* that healers learn how to interpret their own dreams as well as the dreams of others. This learning process is not done is isolation, as the novice must be assisted throughout the journey by a teacher/mentor who specializes in dream interpretation. In my personal experience as an *itola*, I was directed to my teacher in a dream as this individual had decades of experience with the process of generating knowledge through dreams.

The reason why mentors are required is because initiates need to be assisted in the knowledge generation process since the novice is still learning and discovering their own abilities. Hence, they might not have clarity on the meaning of certain dream messages. Mentors serve to assist the initiates in interpreting the messages conveyed in their dreams, unravelling the hidden meanings and guiding them towards embracing their spiritual gifts and responsibilities (Sandlana & Mtetwa, 2008). Through this process of dream analysis, initiates gain insights into their calling, purpose, and the work they are destined to carry out as healers (Chinyama, 2017).

In this context, dreams can serve as narratives that can be analysed to find relevant messages which can be used to bring about healing and reconciliation. According to Walsh (2014), it is necessary to distinguish between the status of dreams as experiences, and thus as objects of narrative report, and the status of dreaming as itself a kind of narration. He argues that this is because dreams have been important in many cultures around the world and that people's fascination with dreams has a lot to do with the fact that they themselves are narrative. In the Xhosa cultural context, dreams are a form of narrative, as evidenced by the existence of the *ukulawula amathongo* dream narration ceremony.

The Xhosa dreamer is often required to share their dreams in a narration ceremony, known as *ukulawula amathongo* ("to interpret the dream messages"). This process includes a first-hand account of the dream

experience, as the dreamer gets to share his/her dream first-hand with those who are listening. The dream narration ceremony has long been regarded as powerful sources of insight and guidance in various cultures in Southern Africa (Cumes, 2013). These dream interpretation ceremonies are seen as a direct invitation from the ancestors to embark on the path of healing and spiritual service. They help to guide the initiates towards fulfilling their destiny as community healers, hence the communal sharing element of the narration ceremony (Bakow & Low, 2018).

Researchers argue that it is through dream narration that Xhosa-speaking people maintain a strong connection to their ancestors, drawing knowledge, guidance, and blessings from the spiritual realm (Booi, 2004) (Hirst, 2000, 2003, 2005). By engaging with their dreams and interpreting the messages they receive, Xhosa-speaking people not only continue to honour their cultural heritage, but they also forge a deep bond with their ancestral spirits by participating in the generation of new knowledge together (Ainslie, 2014). Dreams narration, therefore, serves as a powerful tool for communication, self-discovery, and collective spiritual growth in Xhosa society. In such contexts, *ukuthwasa* serves as a vehicle for the generation and transfer of knowledge within families and communities (Makhanya, 2012).

As evidenced by the critical reflections on case studies 1 & 2, dreams have the power to reveal hidden aspects of individuals but can also reveal information about entire families and communities. Through the *ukulawula amathongo* ceremony, individuals can confront their fears, unresolved conflicts and limiting beliefs, leading to personal growth and transformation. In the context of African culture, dream narration rituals are a profound spiritual practice that harnesses the wisdom of our subconscious minds to foster creativity, insight, and collective growth (Chinyama, 2017).

Furthermore**,** the cultural and spiritual foundations of dreams in Xhosa culture reflect a deep reverence for the spiritual dimensions of human existence and the interconnectedness between the living and the ancestral realm (Cumes, 2013). The following thematic framework explores these concepts by highlighting how this interconnectedness can be undermined by conflict, and the ways in which such disturbances are understood and addressed. The case studies presented in this thematic framework showcase how when conflict between family or community members ensues, dreams (and ritual practice) can serve as a conduit for communication, guidance and healing thereby shaping the healing practices of entire families and communities (Mlisa, 2009).

Thematic framework 2: ***Trauma as manifested through conflict and the undermining of relationships***

The following case study highlights the importance of dream messages in resolving kin conflicts within Xhosa-speaking families where relationships have been compromised. In this case study I present a dream, and the actions taken because of the dream, of a participant Uncle Thole, who comes from Peddie.

There was a history of significant conflict in Uncle Thole's family. He had received a powerful dream which he connected to this conflict and thus sought advice from a traditional healer. The consultation confirmed the need for a healing ritual and pointed out the way for the strategies to be utilized in the healing process. As is custom, he called a family meeting and shared his dream with the family and by popular vote it was agreed that the ritual would proceed at his own homestead. The following account details the healing strategies that were utilized by Uncle Thole and his family during the ritual and how the conflicts that were tearing the family apart were addressed.

Case study 3: Uncle Thole's story

It is important that we unpack the problems that had been going on within the family that led up to Uncle Thole receiving his dream. Uncle Thole is the second born male child from his father. He has two brothers, one older and one younger and three sisters, two of whom are older than him. His youngest sibling who we will refer to as 'X' was the family member with whom he had developed a serious conflict.

Uncle Thole is the ceremonial patriarch in the clan because his older brother, who traditionally would take the position of patriarch is sickly and thus is unable to preside over the family rituals. Due to his older brother's ill-health, Uncle Thole was then elected as patriarch by the family. Uncle Thole is a faith healer known as *umthandazeli* in isiXhosa, and he belongs to the Zionist independent church in his community. Faith healers are some of the most popular indigenous healers in South Africa since they practice a combination of Christian and African religious beliefs (King, 2012). The *umthandazeli* is usually a professed Christian who belongs to either a mission or African independent church (Setswe, 1999). Faith healers heal using Christian relics such as holy water, rosaries, prayer and by laying hands on the patient (Setswe, 1999). The key difference between the faith healers and other South African indigenous healers is that among the faith healers the gift of healing is believed to come from God and not the ancestral spirits (Mabona, 2004). Although Uncle Thole is a Christian, he still practices indigenous spiritualty as is the case with most members of the Zionist church.

As the family patriarch, his duty is to preside over the sacrifice and offerings ceremonies made to the ancestors by the family. He holds the *umkhonto* of the family, which is a ceremonial spear which is used to stab the sacrificial animal during a sacrifice. The person who holds the *umkhonto* is referred to as the *intlabi*, hence then Uncle Thole is the *intlabi* of his family. Uncle Thole's father had a polygamous marriage with two wives. Growing up, Uncle Thole had a relatively good relationship with some of his siblings although they were born of different mothers. Uncle Thole's older brother and two older sisters were born of the same mother (the senior wife), whilst himself and his younger siblings were born of the second wife (the junior wife). When they were small children, there was no clear distinction in the homestead about who was born of who as the primary emphasis was placed on the fact that they were all children of the same father.

However, relations were tense between the two wives and as Uncle Thole and his siblings got older, distinctions became clearer and alliances more pronounced. The senior wife, being superior to her sister wife, often forced her hand in the decision-making of the household, leaving very little room for the second wife to have a say in the running of the homestead. This dynamic of power created tension between the two women, which eventually resulted in the senior wife not having a good relationship with some of the junior wife's children. As he puts it "bebengajongani ngamehlo" *(the two women could not look each other in the eye).*

In Uncle Thole's childhood homestead, each wife had her own house from where she lived, cooked and raised her children. His father would move between the two houses. There was one family garden in the homestead from which crops were planted. The family shared the produce amongst themselves during the harvest season. However, due to the escalating conflict between the two wives, the situation in the homestead gradually became tense up to the point where the women started to accuse each other of witchcraft. Each one blamed the other for the tension.

Uncle Thole recalls a time when things were so bad that his mother banned him and his birth siblings from eating food that was prepared by the senior wife out of fear that it would be poisoned. The senior wife also banned her children from eating the junior wife's food for the same reasons. This back-and-forth between the two wives was traumatic for the children of the homestead because they were too young to fully comprehend what was going on. As he puts it "Bekunzima. Imbiza bezingaphakelani. Xa besithe satya ukutya okungaphekwanga ngumzali besifakwa induku" *(It was difficult. The women did not dish out for each other. If we ate food that was not cooked by our mothers, we would be beaten with a stick).*

He recalls that at times they would receive beatings from their respective mothers if they had eaten food prepared by the other woman. Siblings in a household often share food and snacks with each other, so it was extremely anxiety inducing for the children to have to hide information from their mothers.

However, the senior wife did have a soft spot for one of the junior wife's children, the youngest daughter, X. Out of all the junior wife's children, she was the only one whom the senior wife was warm towards, even going as far as dishing up food for her whilst refusing to serve food to the junior wife's other children. As a result of this selective treatment from the senior wife, X ended up having a strained relationship with her birth siblings, especially with Uncle Thole. He and his younger brother would often accuse X of gossiping about their mother to the senior wife so that she can continue to benefit from the selective treatment. It is important to note that as the senior wife in the homestead, the first wife had access to more resources than her sister wife. Meat for example was distributed between the two houses from her kitchen, and all the produce from the family garden were divided from her kitchen. This dynamic also contributed to the tension between the two women as the junior wife often accused the senior wife of hoarding resources for her house and her children instead of distributing them equally between the two houses as is custom in a polygamous household.

According to Uncle Thole, because X was favoured by the senior wife, she often got access to food and treatment that he, his mother and younger brother did not get access to. This created bitterness between him and X. As the eldest son of the junior wife, he felt very protective of his mother and did not like to see her in distress. He resented his younger sister for having a close relationship with the woman who made life difficult for their mother. He saw this as a betrayal and went as far as to say "Umthanda njani umntu ongamfuniyo unina? Ayontakatho leyo?" *(How do you love someone who hates your mother. Is that not witchcraft?).*

He recalls this tension between him and his sister to continue well into adulthood. His older half-sisters were much friendlier than their mother and would visit the junior wife's house often. In his words he explains the dynamic as "besivana kakhulu ngoba bona bebengamfuzanga unina wabo" *(We got along because they did not inherit their mother's spirit)*.

Till this day, he has a healthy relationship with his older half-sisters. However, throughout the years, he and X have had multiple fights and disagreements, especially over matters that related to the conducting of rituals. When X's son fell ill with a sudden illness, the diviner who was consulted recommended that the family perform a healing ritual for him at the family homestead. As the presiding patriarch, it was

Uncle Thole's duty to preside over the ceremony and to make the offering to the ancestors on his nephew's behalf. This placed him in direct head lock with X as the two could not agree on anything relating to how the ritual was to be conducted. It is important to note that when a ritual fails, the blame is often attributed to the patriarch who is leading the ritual as he is tasked with making sure all the proper procedures are followed. Ritual failure is often associated with errors made in the procedures that were applied by the *intlabi*.

He saw X's refusal to listen to his directions as an attempt to disrupt the ritual so that he could be blamed should the ritual be unsuccessful. He considered her to be conspiring against him, to make him seem unreliable as an *intlabi* and patriarch. He accused X of being a witch that was hellbent on disrupting the flow of power in the family and thus his ability to lead as the family patriarch. He felt that his accusations were backed by the fact that X had a close relationship with the senior wife, who had been accused of witchcraft for years by his mother.

The accusations of witchcraft levelled against X by Uncle Thole further exacerbated the strained relationships between the siblings. Following the ritual for his nephew, he received a dream and decided to consult with a diviner to get insight about its meaning.

In the dream, he saw himself being unable to speak or stand on his legs. As he was laying in his bed, he saw a black scorpion bite him in the leg and black poison spread throughout his legs, up his torso and into his heart. The poison left him paralyzed and he could not move. He then saw a female shadow standing in the corner of his bedroom staring at him. He felt afraid and cold but could not cry out for help as the poison from the scorpion bite had paralyzed him.

The diviner told him that this was a sign of a threat in his life and that this threat was coming in a form of a woman who has access to his house, hence he saw her standing in the corner of his bedroom in the dream. Although the diviner did not mention any names, Uncle Thole took this as evidence that indeed X was a witch and was using witchcraft on him. Out of all the women that have access to his house, be it neighbours who come to visit, cousins**,** church friends and even patients, he was adamant that the diviner was referring to X since she was the only woman in his life that he was having conflicts with.

This dream and the divination cemented his distrust of his sister, and as he put it "ndamboniswa ethongweni ngoku yintoni enye ebekuphinda indidibanise naye?" *(I saw her in a dream, so what else would I want to do with her?).* Although he never consulted with another diviner regarding his scorpion

dream to get a second opinion, he still held on to the belief that X was an evil witch that comes to his house with the intention to poison him.

It was in the backdrop of all this conflict that Uncle Thole received the dream about the ancestor requesting a healing ritual be performed in the family to address the strained kinship relationships within the family.

In the dream, he saw himself seated in the sacred hut in his homestead. He was surrounded by family members, both living and deceased. In the dream, he saw an old dark-skinned man holding a bag full of herbal medicines and plants. The old man seemed sad, and he refused to speak. The dream shifted to the kraal, where Uncle Thole saw the family gathered for a ceremony. The old man spoke in the kraal and said that he wants a healer to perform a ritual for the family.

Upon waking up from his dream, he shared it with his wife who suggested that he consult with a diviner to find out what the dream meant. He consulted with a local diviner who confirmed that the ancestor who was requesting the ceremony was one of the founding fathers of the family, an old patriarch. The diviner explained that the ancestor appeared sad because he is displeased by the state of relationships within the family unit and wishes to have the family gather for over a period of six days to have a reconciliatory feast. The diviner explained that the constant fights and bickering was having a negative effect on the health status of the family and the ancestor was calling for this to be rectified. The diviner advised him to call a family meting to share his dream in a dream narration ceremony *(ukulawula amathongo)* with the rest of the family so that the ritual can be performed. He followed the diviner's advice, called the family and shared the news.

At the family meeting, the family members unanimously decided that everyone in the family must participate in the preparations and attend the ritual. The family decided to purchase a white goat to be used as the sacrificial animal since white goats are associated with peace, purity and reconciliation in the Xhosa culture. The use of a white goat in a ritual is referred to as *icamagu elimhlophe*, which loosely translates to 'the white [pure] prayer'. Following the family meeting, preparations for the ritual began. It was decided that the feast would be held at Uncle Thole's homestead since that is the kraal he had seen in his dream and where the ancestor appeared. Several indigenous strategies were utilized by the family in the resolution of the conflict through the use of ritual - including the brewing of beer, visiting sacred sites, sacrifice of a goat and a dance ceremony known as *intlombe*. The strategies that his family utilized can be summarized as follows:

1. ***Ukusila*** – the brewing of traditional beer (*umqombothi*). This process required that the female family members gather to brew beer over the course of three days. It was decided that the family members who were to brew the beer must bathe in medicinal herbs to ensure ritual cleanliness. The idea was that if the people brewing the beer have been cleansed, then the product of their brew will be energetically clean as well. All the family members that were participating in the brewing of the beer were required to be celibate for the duration of the brewing process.
2. ***Ukulungisa ikhaya*–** the cleaning of the homestead by removal of weeds and thorns. This process required all the able-bodied males of the family to participate in the cleaning of the homestead by cutting grass, removing weeds and general caretaking of the homestead. This process was important because it allowed for the family to take pride in the appearance and general cleanliness of their home.
3. ***Ukutheza* –** the collection of firewood from the forest. This process required that all the able-bodied members of the family participate in the collecting of firewood. Labour was divided according to gender roles, where the female members collected firewood for the purpose of cooking in the *iziko* (the kitchen). This firewood was then used for all the general cooking activities in the kitchen throughout the six-day period of the ritual. Whereas the male members collected firewood for the purpose of cooking and grilling the meat in the kraal, where the sacrifice of the animal took place. It is Xhosa custom that the kitchen duties be performed by the females and the sacrifice and cooking of the sacrificial animal be done by the males.
4. ***Ukurhuma ezinkundleni* –** the making of offerings at the sacred sites in the river and the forest. This process required that on the day of the animal sacrifice, the older male members of the family, accompanied by the indigenous healer who was leading the ceremony to sacred sites where offerings of tobacco, seeds and beer were made to the ancestors and guardian spirits that reside in the sacred sites. In the forest, a small fire was made, and tobacco was burned as an offering. At the river, white beads and pumpkin seeds were offered to the ancestors that reside in the water. Pumpkin was chosen because it is sweet, and water spirits are known to appreciate sweet foods. At both the river and forest sacred sites, beer was offered. Whilst at the sacred sites, the older male family members pleaded on behalf of the family for a peaceful and successful healing ritual. Water was collected from the river to make the *ubulawu* mixture that was used for ritual purification.

5. ***Ibhunga* –** the family group therapy session. This process required that on the day of the sacrifice, in the morning after breakfast, the family gather in front of the kraal *(inkundla)* to have a group therapy session where all the conflict issues of the family were to be discussed. Each participating family member was given an opportunity to air their grievances. This process allowed for people to speak openly about what and who in the family was troubling them so that forgiveness could be promoted. Those who had been the subject of a grievance were given the opportunity to apologize and to make amends with those they had offended. This step was a key element in the peace making and reconciliation process within the family. Tea and coffee were served after the completion of the therapy session. This entire process was facilitated by the traditional healer who was leading the ceremony.
6. ***Ukuxhela* –** the offering of the sacrificial animal. This process required that after the completion of the *ibhunga*, the family gathered in the sacred hut in order to begin the sacrifice portion of the ritual. It was at this stage that community members were allowed to join the family. The family patriarch gave a report to the community, detailing the reasons why the ritual was being performed. He also reported on the steps that were taken by the family to forge forgiveness and reconciliation. After giving the report, an older male member of the community accepted the report and thanked the family for informing the community. He expressed his support for the ritual and wished the family healing and peace. This process is customarily known as *ukungqina* (giving testimony), and the older male community member who does the *ukungqina* is referred to as the *ingqina* (the witness). The family, accompanied by the older male community members made their way to the kraal where the sacrifice of the animal was made. In this case, it was a male goat. The meat was not cooked on this day, rather it was kept and consumed the following day.
7. ***Intlombe-*** the ritual dance ceremony. This process required the participation of all the family members and community members who were in attendance for the animal sacrifice. It was performed on the evening of the sacrifice ceremony. The *intlombe* included the singing of traditional songs and the beating of the drum to invoke the spirits of the ancestors so that they could join the festivities.
8. ***Ukushawama-*** the ceremonial eating of the meat and the drinking of the beer. The eating of the animal was done the morning after the sacrifice. The process of butchering and cooking the meat is known as *ukuhlahlela*. Once the meat was cooked, it was dished out. The family ate first before any meat was shared with the rest of the community. This process required

that first the meal be blessed by the healer who was leading the ceremony in a prayer ceremony.

9. ***Ukutshisa ithambo* –** the ceremonial burning of the bones and animal skin from the sacrificial animal. After the completion of the feast, all the bones were collected and ceremonially burned in a consecration. This process required a chant from the family saying "Uthuthu ethuthwini" (ashes to ashes, dust to dust) as a sign that the body of the animal was being returned to the earth from which it came. This process served to complete the cycle of the animal's life and to close the ritual.
10. ***Amahlaza* –** the including family meeting where family members share their opinions about how the ritual process went and how things can be improved for future family rituals. This process was the last strategy that was utilized by the family in the process of conducting the healing ritual. It required that the family members gather in the hut the day after *ukutshisa ithambo* to share their personal opinions about how the ritual went and if there were things that could have been done better.

During the ritual, Uncle Thole and X were able to be cordial with each other during family gatherings, although their relationship has not yet been fully reconciled. There are still many issues that have been unaddressed between the two of them, such as his bitterness about X's close relationship with their father's senior wife. However, he considers the ritual to have been successful in the sense that X was able to stay in his house for the six-day period of the ritual without the two of them getting into an argument. As he explains, "icamagu livumile ngoba siyakwazi ukujongana ngamehlo ngoku*" (The prayer worked because we can now look each other in the eye).*

As evidenced by Uncle Thole's story, polygamy has the potential to create conflict within the family unit, which can in turn serve as the bedrock for witchcraft accusations being levelled against certain family members. These accusations can have detrimental effects on the wellbeing of the family. Research has shown that in Xhosa-speaking households, family conflicts create disruptions in kinship relationships, resulting in disruptions in wellbeing (Ohajunwa, 2019).

As observed in Uncle Thole's story, these disruptions in wellbeing can be mediated with the help of dreams, ancestors and ritual. This is because Xhosa-speaking people believe that finding balance in life is fundamental to wellbeing (Ohajunwa, Mji, & Kalenga, 2021).

This balance does not exist outside of a person but is an intricate part of who a person is in relation to others. Being in harmony with the family and the ancestors plays a critical role in the maintenance of wellbeing, and this understanding emanates from a sense of knowing that is established between the living and the deceased within the system of kinship (*ukuzalana).* In Uncle Thole's case, the intergenerational cycles of conflict within his kin group had greatly undermined and even compromised the values of trust and mutual care within the kinship unit. These kin conflicts were addressed using indigenous Xhosa cosmologies such as dreams, divination and ritual.

According to the diviner who interpreted Uncle Thole's dream, it was crucial for him and his family to reconcile as the strain in their kin relationships was starting to take a toll on their wellbeing as a group. The words that Uncle Thole used to describe the tensions such as "imbiza aziphakelani" ("the pots do not dish out for each other") can also be interpreted to signal how the breakdown in kin relations literally can translate to disruptions in the sustenance of the household as food is greatly linked to wellbeing. Kinship is particularly important in Xhosa society and thus healthy relationships are deeply associated with wellness, wellbeing and sustenance. Ritual and ceremony also play a key role in the maintenance of these relationships. Research has shown that in the context of kinship, African spirituality helps African people to attain a connection with one's higher self in the sense that one achieves a high level of consciousness and awareness about their life and surroundings (Marumo & Mompati, 2018).

According to Mshayisa**,** Bhagwan & Dewan (2024), kinship harmony is important as it "affords families an opportunity to preserve their spiritual and cultural identity by remaining under the care of kin members, and that care is made seamless through adoption of the Ubuntu concept that underpins African spirituality" (Mshayisa, Bhagwan, & Dewan, 2024, p. 1). This is important for African families as spirituality helps to guide families through their way of life by teaching family members to care for one another and stay united irrespective of the challenges life presents them with**.** In the indigenous Xhosa context, the system of kinship *(ukuzalana)* acts as the branches of a tree, spreading in all directions to embrace everyone that is born of the family lineage because it not only connects the living members of the family but also connects the ancestors from which the family is descended. Due to the spiritual nature of *ukuzalana,* Xhosa people understand kinship to be an intimate system that not only connects people by blood *(igazi),* but also by spirit *(umoya).* Through this intimate connection of blood and spirit, the ancestors can nurture and protect their descendants.

According to Edwards, Makunga**,** Thwala & Mbele (2009), "the intimate relationship between the living and the dead is revealed through the importance attached to the concepts of *umphefumulo* (soul),

umoya (spirit) the *isithunzi* (shadow) and the ancestral shades' brooding *(ukufukamela)* over the lives of their descendants just as a mother hen broods over her eggs" (Edwards, Makunga, Thwala, & Mbele, 2009, p. 2). Additionally, the authors state that it is commonly believed that unless appropriate rituals are performed, this brooding from the ancestors can lead to illness and vulnerability to various ecological hazards such as violence, suffering and witchcraft.

Furthermore, according to Edwards (1985), ancestral ceremonies typically consist of community gatherings involving a ceremonial sacrifice of some kind**,** including various sorts of rites and rituals involving a particular animal such as a goat, sheep, cow or bull in a particular place such as a family kraal. These rituals are typically performed with a particular person leading the ceremony, for example a healer or the patriarch. An example of this is showcased in Uncle Thole's case where for his family unit to resolve the conflict, they had to *fukama* together in the family homestead throughout the six-day period of the ritual. From this *imfukamo* which included the Xhosa cultural dance ceremony known as *intlombe*, the ancestors were then able to brood over their descendants to guide them through the reconciliation process.

Therefore, from this we can ascertain that the aim of these type of rituals is to strengthen the spiritual bonds between the ancestors and their living kin, as well as to strengthen bonds within the living kin themselves. Edward, Makunga**,** Thwala & Mbele (2009) argue that from a psychodynamic perspective, ancestral bonds and their communications can either be threatening or reassuring depending on how these somebodies had been in their former physical existences. This means that for example if verbal abuse and familial rejection was common in the family unit whilst the offending members were still alive, then such experiences will remain rooted in the collective consciousness of the family and will be amplified by familial and sociocultural spiritual systems even after the death of the offending members. This trauma may assume gigantic proportions and readily manifest an intergenerational trauma known as *abaphansi basifulathele* (the ancestors have turned away), requiring appropriate appeasement rituals.

It is important from the psychodynamic perspective that conflict within the family unit be addressed whilst those who are at conflict with each other are still alive so that the trauma does not pass on to subsequent generations through the sociocultural belief systems of kinship (ibid). The authors argue that these are very good reasons for surviving generations within the family unit "to continue to communicate and honour their ancestors, be well behaved and perform appropriate ceremonies to ensure continued health, protection and prosperity for future generations" (ibid, p. 9). As part of the psychodynamic effects of ritual to appease the ancestors, Xhosa healing rituals also bring the family and the community together as these gatherings often include collective singing, drumming music and

dances to invoke ancestral spirits. These rituals also include the drinking of *umqombothi* (sorghum malt beer) which is often done in communion.

Some of the strategies that were utilized by Uncle Thole's family included singing, dancing, drumming and drinking of *umqombothi* in communion in a dance ceremony known as *intlombe*. The *intlombe* dance ritual is a strategy used by Xhosa-speaking people to reach an elevated state of connection to self, others, the ancestors and to the environment using music. According to Sodi et al. (2011) "the dance has some resemblance to a hypnotic trance that results in a change in emotional expression and feeling of rejuvenation and hyper suggestibility" (Sodi, et al., 2011, p. 104). When in this trance state, heightened by the effect of *umqombothi*, people often feel a strong sense of unity with the universe which improves their personal mental health. Since it is also a community event, it strengthens social cohesion which promotes the well-being of the entire community (Ahmed, 2024). Through these core experiences, spiritual beliefs are reinforced. According to Newberg (2000), these experiences are neurobiological in nature in the sense that the orientation association area in the brain is disrupted through repeated rhythmic motion, such as dance and prayer, and this disruption results in feelings of oneness with others.

The trance state induced by ritual and dance blurs the boundary between one and the world thereby allowing the spiritual experience to lead to healing (Newberg, 2000)**.** The *intlombe* ritual that Uncle Thole and his family participated in during their healing ceremony was intended to bring the family closer by strengthening bonds through the communal drinking of *umqombothi* and through getting into trance states together. For Uncle Thole's kin group, the dance ritual therefore played a key role in the management of conflict and strengthening kinship connections. According to Mbiti (1960), ritual is intimately linked to the tribal and communal identities that form kinship. This suggests that one of the most important functions of ritual is that of creating a sense of ethnic identity as well as that of providing a framework for strengthening kinship bonds within family members, both dead and alive. Therefore, in practice, to be a member of a kin group is to be completely immersed in the beliefs, traditions and spiritual practices of the group.

In the Xhosa context, kin groups are organized in *iziduko* (clan names). It is a common saying that "*abantu bazalana ngesiduko"* (translated to 'people are kin through clan names'). According to Jonas (1989), it is common practice amongst Xhosa-speaking people to refer to a clansman/woman as *umthile* (plural *amathile*), literally meaning 'a certain (person) of certain kin' and "gives expression to the relevance of clanship for personal identity. For this reason, it is important for someone to be aware of

his *isiduko*" (Jonas, 1986, p. 60). He further argues that the *iziduko* "must be known even to a child because the clan is the source *(umnombo)* from which someone originates" (ibid). Unlike personal names that are received after birth or initiation, the clan identity is part of an individual already upon conception. Jonas goes on to argue that "clanship is therefore an inherent quality, constituting a vital part of the individual's identity. Apart from one's personal names and surname, the latter frequently a lineage name, every individual also has a clan name which he shares with all his fellow-clansmen" (ibid). This means that a person's *isiduko* awards them a deep sense of belonging, thereby making *ukuzalana* something to which an individual is inescapably bound.

When conflict occurs between members of the same *isiduko*, as was the case in Uncle Thole's story, then the ancestors of that *isiduko* might communicate with their descendants through dreams or divination as to what the proper conflict resolution procedures must be. Thus, ritual and spiritual practice form a key part in the structure of kinship relationships in indigenous Xhosa society. The practice of narrating dreams and the seeking of guidance about their meaning is an integral part of Xhosa spiritual life and thus is an essential part of maintaining healthy kin relationships. The dream interpretation offered by spiritual practitioners plays a vital role in helping individuals make sense of their dreams, navigate life's challenges, and maintain harmony with the spiritual world (Edwards, Makunga, Thwala, & Mbele, 2009). As showcased by Uncle Thole's case, dreams can carry vital information about how to resolve conflict (and the trauma emanating from that conflict) within the family unit to redeem wellbeing.

Additionally, kinship rituals play a key role in shaping spirituality amongst Xhosa speakers because at its core it is centred around the idea of shared morality. Jonas (1989) argues that in the worldview of Xhosa-speaking people, "there is a particular emphasis on man in relation to other people, nature, and the supernatural" (Jonas, 1986, p. 58). This means that for Xhosa-speaking people, the human being does not exist in isolation but rather is a part of a bigger whole at both the family and community levels. In such a system where one's humanity is closely intertwined with others, notions of shared morality become an essential part that governs how people relate to each other. This is the concept of *Ubuntu*, which positions that '*umuntu ngumuntu ngabantu'*, loosely translating to 'a person is a person through other people'.

According to Magezi (2020), *ubuntu* is a quality that places value on collective consciousness by advocating for mutual respect between individuals and thus forms the foundation on which communal ethics are established. Ayinde**,** Ojagbeni**,** Makanjoula & Gureje (2021) state that in many cultures

around the world, the vehicle for this human quest is spiritualty, which may or may not be associated with religion. In African contexts, spirituality and religion are used interchangeably due to both systems being used as vehicles for achieving connectedness to self, the community and to a higher being. The authors argue that "in African thought systems, it is almost an impossible task to isolate religion and give it a precise definition…for it is inextricably woven into the entire fabric of life, of being and of existence. It dominates language, thought patterns, social relationships, attitudes, ethics, and philosophical dispositions" (Ayinde, Ojagbemi, Makanjuola, & Gureje, 2021, p. 278).

When discussing the role of African cultural values in shaping the lives of African people, Gyeke (1996) argues that from birth to death, an African person's life is infused with spiritual rituals and meanings, from daily life and family life events, important life thresholds, social interactions and in kinship. The author asserts that to be born into African society is to be born into a culture that is intensely and pervasively religious and that means and requires participating in the religious beliefs and rituals of the community. This means that the African person's everyday life is enacted and experienced through prayer, convocation and ritual performance. This understanding of reality greatly influences the thought processes and strategies that are applied to resolving issues of conflict within kinship groups because in the indigenous context, spirituality goes beyond beliefs, rituals and ceremonies and serves as the point of reference for the morality that guides social relationships.

Therefore, in terms of issues of morality and social relationships, Xhosa-speaking people place importance on the rejection of behaviour which might be deemed as unethical or evil. As evidenced by Uncle Thole's story, witchcraft is often associated with evil and is deeply frowned upon in Xhosa society. In many cases, people who have been accused of witchcraft experience strained social relationship which in turn can possibly result in trauma. Jealousy, envy and resentfulness are frequently common in relationships that are bedevilled with witchcraft suspicions and accusations. According to Niehaus (2013), these accusations arise "from hostile struggles within the family, and from a reality of hatred that lies beneath the surface of togetherness" (Niehaus, 2013, pg. 3). This phenomenon is caused by what Ashforth (2005) terms as 'spiritual insecurity', where the breakdown in kin relationships creates anxiety around family stability and continuity in a cultural system where morality is deeply linked to the status of relationships. He argues that morality can often be associated with witchcraft, magic the duality of good and evil.

The following case study highlights the impact that witchcraft accusations can have on individuals and their families, which can either exacerbate existing trauma or result in new trauma. This next case study presents the story of a participant who had been accused of witchcraft by members of her family. This

case details the impact of the accusations have had on her wellbeing, as well as the wellbeing of some of her children. Additionally, it also reveals how accusations of witchcraft can have a negative impact on the lives of women, their children and their families.

Case study 4: Patricia's story

Patricia was born in a village on the outskirts of Peddie. She is an only child from her parents, who divorced when she was two years old. Her father lived and worked in Johannesburg as a delivery man. Due to the lack of work opportunities in their part of the Eastern Cape, known as the Ciskei at the time, her father had to relocate to Gauteng for work as was the case for many indigenous men during the apartheid era. He was a migrant labourer, and because of the difficult living situations in the migrant labour hostels, he could not bring his family to go live with him in Johannesburg. According to Patricia, she later found out as she grew older that her father's absence played a key role in her parent's separation citing that "bohlulwa kungahlali kuka Tata ekhaya" *(they broke up because my father did not live at home).*

Patricia's birth mother left her to be raised by her father's mother, and thus she grew up calling her grandmother 'Mama'. Patricia did not have a relationship with her biological mother, who after leaving her behind did not make any further contact with her.

She recalls her grandmother referring to her birth mother as a 'child deserter', alluding to the idea that she was abandoned. She recalls at times her grandmother would accuses her birth mother of being a witch that birthed a child just to leave it behind, often saying "zizinja neekati ezilahla abantwana *(it is only dogs and cats that abandon their offspring).* Patricia grew up with a sense of resentment for her birth mother because she felt abandoned by her and said in her own words "ndinomama omnye mna ongulo undikhulisileyo" *(I only have one mother, who is the one who raised me).* When her birth mother died in 2021, Patricia refused to mourn her. She attended the funeral but did not go into the traditional Xhosa mourning period that someone would traditionally undergo when they are morning the loss of a parent. However, she did mourn her grandmother who died in 2010.

Patricia married her husband when she was at the age of 18 years. When she married him, he was still living at home with his parents and siblings. So, when Patricia joined the family, she moved in with her in-laws. Since she was employed at a casino in King William's town (35km from Peddie), she would leave early in the morning and come back to the homestead in the evenings. As part of her duties as a

bride, it was her responsibility to cook the meals, although her sister-in-law assisted her on most days. She recalls having a very good relationship with both her mother-in-law and her father-in-law.

Her father-in-law was a migrant labourer who lived and worked in Port Elizabeth and would only come home to the village homestead once a month after pay day. Patricia's mother-in-law was a traditional housewife and looked after the family and the homestead while her husband was in Port Elizabeth. She and her husband would only see each other on the weekends that he came home. Patricia recalls the tension this created between her in-laws, citing recollections of her mother-in-law complaining that she was left alone to fend for the homestead while her husband is gallivanting in the city, "ebemane athi yena uyafana nomfazi ongenamyeni" *(she would often say she was like a wife who does not have a husband).* Patricia recalls quickly coming to the realization that her in-laws had a strained marriage although this was never publicly addressed in the family.

Patricia's father-in-law adored her and would often tell her how proud he is of the fact that his son chose her as a wife. She recalls her father-in-law gifting her with candy when he returned home from the city as a token of his adoration for her. She recalls that when her father-in-law came back home to the homestead, he would wait until she came back from work before requesting for tea and bath water. Although Patricia's sister-in-law was usually at home and could prepare the tea and bath water, the father-in-law insisted on waiting foir Patricia. She explains that "ebefikela endlini yakhe ukufika khwakhe. Ebeyakuphuma ukufika kwam" *(he used to arrive and wait in his room. He would only come out after I had arrived home from work).*

According to Patricia, her father-in-law preferred to have her attend to him instead of his own daughter and this caused strain in the family. It was customary for a man who worked and lived away from home to bring meat for his family to eat upon his arrival. This meal was called *ukungena endlini* which means to 'enter the house'. Patricia recalls that he would bring home a full chicken and asked her to cook it and to serve the *ukungena endlini* meal. She recalls that he would keep the chicken in his luggage until she returned home from work. He refused to give it to his wife or his daughter, citing his preference for Patricia's cooking as the reason, "ibihlala lonkukhu etasini yakhe ilinde mna ndifike. Ibngasoze ikhutshelwe omnye umntu" (*that chicken would sit in his luggage until I came back from work. It would never be given to anyone else).*

This adoration and expression thereof did not sit well with Patricia's sister in- law. The preferential treatment from her father-in-law caused tension between her and the sister-in-law. Patricia thinks it was

because of jealousy on the part of her sister-in-law that the tension started between them. Her sister-in-law was unmarried and as was tradition in the Xhosa culture, she stayed at home with her parents as most unmarried women do. Patricia recalls that the relationship between her sister-in-law and her father-in-law was so tense that the two of them often got into disagreements. She recalls hearing her sister-in-law making accusations that her father was having an extra-marital affair in Port Elizabeth, although this remained unproven until years later after his death, citing that "wayehlala emthyhola utata esithi uyakrexeza" *(she would always make accusations about father-in-law saying that he was dishonest).*

Patricia recalls her sister-in-law accusing her of witchcraft because she had a close relationship with her father-in-law. She states that the fondness with which he treated her made her sister-in-law jealous and vindictive. Because he was a migrant labourer, he was not at home most of the time to de-escalate and defuse the conflicts that were brewing in his household. Even when he was at home, it was brief, and this barely gave enough time for him to sit and talk things out with his family. Patricia recalls that he would arrive on a Friday afternoon and leave on Sunday morning. This meant that he never had enough time to address the conflicts in the homestead. She expressed this dilemma by saying "ebefika ngobusuku aphinde aphume ilanga lingekajiki" *(he would arrive in the dark and leave before there was light).*

Patricia recalls that the tensions between her and her sister-in-law escalated up to the point where she and her husband decided to move out of the homestead to build a house of their own. This move further exacerbated the accusations of witchcraft that were levelled against her. She recalls that her sister-in-law accused her of breaking up the family by forcing her brother to move out of the family homestead. Throughout the years, these accusations plagued Patricia, and they greatly affected her relationship with her in-laws, leading to the breakdown of trust.

Patricia recalls that relations between herself and her in-laws further deteriorated when her eldest son underwent his Xhosa male initiation into manhood, known culturally as *ulwaluko*. The ceremony includes the circumcision of the initiate, and his recovery from the surgery at the initiation lodge. Customarily, the ceremony is conducted by the clan from which the initiate comes from. So, in this case, Patricia's in-laws were responsible for conducting the ceremony. As is tradition, the men oversaw the planning of the ceremony, while the women were responsible for cooking and feeding the initiate. This meant that her sister-in-law would customarily be required to cook and feed her nephew. Patricia strongly attested to this, and she cited their bad relationship as the reason. She recalls being afraid that

her sister-in-law would poison her son. As a mother she could not allow herself to let someone she does not trust cook for her son during his most vulnerable stage. This fear was further exacerbated by a dream that she had received prior to her son's initiation ceremony.

In the dream, Patricia saw herself seated in her father-in-law's hut, where she had been brewing beer. She heard a voice calling her outside, when she went out to look who it was, she saw her sister-in-law dishing out a plate of food for her son to eat. After Patricia's son ate the food, he dropped dead to the ground. She screamed and ran looking for help.

Following this dream, Patricia blatantly refused to let her sister-in-law cook for her son. Instead, she asked her biological sister to be the one to cook for him. Patricia recalls that this did not sit well with her sister-in-law as it was a big break from tradition. During her son's coming back from the initiation lodge ceremony, Patricia and her sister-in-law got into a big fight in front of the whole village. The two women openly accused each other of witchcraft. The sister-in-law accused Patricia and her sister of being witches that wished to sow seeds of division. The incident did not sit well with Patricia's son, as this was supposed to be his day of celebration. The fight cast a very dark shadow on his special day. Patricia recalls her son telling her this, days after the ceremony was completed, "iyu wayekhubekile kakhulu ngokuba usuku lwakhe lubenesimnyama olahlobo" *(he was deeply hurt by the fact that a dark cloud was shrouded over his special day in that manner).*

Her son had always been protective of her, and he did not like the fact that she was verbally assaulted in such a manner. He confronted his aunt about this and since that day their relationship has been sour. This made his transition into manhood within the family challenging because he was accused of defending a witch and therefore of not caring about the wellbeing of the clan. Patricia thinks the accusations of witchcraft that were levelled against her by her sister-in-law have made it difficult for her son to assert his manhood within the structures of the clan and have thus made him vulnerable. She mentioned that the young man started to abuse drugs and alcohol soon after the breakdown of his relationship with his aunt, thus leading him to a life of crime and violence, "wayengasoze alunge kaloku xa engazovana naekhaya lakhe" *(there was no way that he would be well if he did not get along with his family).* Her son eventually murdered his aunt following a massive family dispute. He is now serving a life sentence without parole in prison for the crime.

Patricia's story shows how witchcraft accusations that are levelled against women can negatively affect them emotionally and psychologically, thus causing them distress and trauma. The witchcraft

accusations that are levelled against women can also affect their children, which can lead to them also experiencing emotional and psychological distress, as was the case with Patricia's son. Unresolved issues of jealousy within the family unit can often result in these witchcraft accusations (Niehaus, 2013).

As evidenced by Patricia's experience, the attention she received from her father-in-law caused her sister-in-law to become jealous and so she accused her of witchcraft. The family did not address the conflicts that were brewing in the household, and this worsened the conflict, further amplifying the accusations. The lack of resolve for such issues can have negative implications for wellbeing. According to Ainslie (2014), unresolved family disputes often lead to deep breakdowns in kinship relationships within Xhosa-speaking families. This can lead to psychological distress and overall compromised wellbeing for those involved. Hence, the lack of resolution when such conflicts arise can further exacerbate the familial divisions, further worsening the wellbeing of the family unit.

Another interesting factor in Patricia's story relates to the concept of evil intent that is driven by jealousy. As evidenced by her account, she understood her dream to mean that 'evil' acts were going to be enacted on her son during his initiation ritual. Hence, she tried to avoid the 'evil' by refusing her sister-in-law's cooking. In this case, the concepts of evil and witchcraft are intertwined and understood to be dependent on each other. That is, witchcraft is viewed as an evil act that causes illness and compromises wellbeing. Some researchers argue that the concepts of evil, magic and witchcraft can act as a means of perpetuating trauma (Csordas, 2013; Asforth, 2005;). In his work, Csordas (2013) presents key philosophical questions that need to be asked when it comes to the issue of evil. He asks 1) does it make a difference to distinguish ontological, cultural, discursive, or personal understandings of evil in relation to morality? 2) is it possible to be/do evil and not know it?

These are important questions to consider because the metaphysical aspects of the concept of evil have often had it dismissed as a mythological idea instead of empirical idea (Scheper-Hughes & Bourgois, 2004). Although the metaphysical aspects of the concept of evil cannot be ignored, it is important to note material categories such as murder, genocide, torture, rape, and slavery as forms of abuse have one thing in common, that is, they can be described as evil across many cultures (Csordas, 2013). Additionally, Csordas argues that the readiness to dismiss evil as a metaphysical category, stems partly to the misconception that evil is a Christian concept and therefore inherently ethnocentric. More precisely, he argues that because since the concept of evil is hegemonic in Western civilization,

"understandings of evil might be occluded by a lingering veil of Christian sensibility" (Csordas, 2013, p. 526).

Ngubane (1977) theorizes that within the indigenous South African context, disturbed power dynamics are closely associated with accusations of witchcraft. She further argues that the neutralization of witchcraft is closely linked with a desire to maintain social order both within the family unit and in the community. This search for order can led people to consult with a healer to validate these worries. This case is observed in Uncle Thole's story where he consulted with a diviner as a means of confirming his sister's suspected witchcraft.

In his study of the dynamics of witch trials, Zicker (2019) describes witchcraft accusations as serving as a political tool geared to maintain the social order. According to the author, there are two common social science explanations of witchcraft 1) the mass hysteria theory and 2) the scapegoat theory. The mass hysteria theory has been used to explain examples such as the witch killings of the reformation and counter-reformation in the 16th and 17th centuries. During these religious wars, communities demanded magistrates find a reason for their ills, oftentimes demanding and forcing the decisions to condemn community members.

In the scapegoat theory, someone in the community takes the blame for the problems. As described by Girard (1972) in what he calls "collective projection", the community may unite against certain individuals (i.e., the scapegoats) to blame them as a cause for a specific crisis. This is done to prevent the complete self-destruction of the community. The marginalization, or even murder of the scapegoat acts as a beneficial release of social tension, thus restoring social order (Girard, 1972). Both theories have significant challenges to overcome in explaining actual witchcraft accusation and prosecution patterns, both historically in the West and cross-culturally. As such, it is difficult to ascertain whether Patricia or Uncle Thole's stories involved scapegoat theory or mass hysteria theory or a combination of both in their construction of events. But either way, both participants experienced witchcraft as a real threat to their wellbeing and overall sense of safety.

Patricia's and Uncle Thole's stories are unfortunately some of many such stories where witchcraft accusations have resulted in severe breakdowns in family bonds. In the narrative given by Uncle Thole, the accusations towards his mother in her polygamous marriage were the result of her being a junior wife. The issues of jealousy between the senior and junior wives also contributed to the toxic family dynamics.

In his report on witchcraft in the Transkei region of the Eastern Cape, Meel (2009) states that amongst the Xhosa-speaking people of the region, "the most prolific single source of witchcraft is the conflict of co-wives, reflecting tensions in the polygamous household" (Meel, 2009, p. 62). This is because polygamy creates competitive power dynamics between co-wives which can become toxic and eventually lead to accusations of witchcraft and sorcery. Considering how the historical trauma experienced by Xhosa-speaking people has negatively affected kinship bonds, added strain stemming from witchcraft accusations adds fuel to the fire on an already battered cultural kinship system.

Patricia's story shows how jealousy can play a key role in witchcraft accusations, which can result in extreme violence. Meel (2009) argues that because there is a general belief that illness and other bad occurrences are related to witchcraft, the women who are identified as witches are therefore at risk of being murdered. When a healthy young person dies suddenly, the common belief is that it is due to witchcraft and these women are often violently attacked because the desire of the community is often to eliminate them. This shows that amongst Xhosa people, witchcraft and magic are not merely mythological concepts but rather have real-life repercussions for those accused of practising it. In Patricia's story, unresolved family politics created power dynamics that instigated the witchcraft accusations up to the point where the result of this was murder.

As Meel (2009) suggests, witchcraft accusations frequently occur within the family group where relationships are strained. This creates a dilemma that suggests that indigenous mechanisms can perpetuate trauma if those mechanisms have been disrupted, rendering them dysfunctional.

Additionally, this presents a dilemma where the culturally appropriate processes for resolving conflict have been undermined. This leads to unresolved family politics creating situations where tensions grow to dangerous proportions, placing family members at risk if they are accused. According to Meel (2007, 2009), the belief of witchcraft is more dominant in rural areas where poverty usually leads to strained human and in-law relations, and where most illnesses cannot be explained. There are certain laws that deal with witchcraft, but the beliefs are so strong that these laws hardly limit their effect in the community.

Meel (2007) thinks that the issue of witchcraft and counter killing of witches is associated with lack of education. However, this is not always the case. Patricia is a professional woman and yet still faced witchcraft accusations and Uncle Thole is an educated man who enjoys a middle-class lifestyle in his community and yet still accused his sister and stepmother of witchcraft. Therefore, witchcraft accusations in Xhosa-speaking families and communities are not limited to only the illiterate and uneducated. Even literate people do believe in witchcraft especially when it becomes difficult to explain

the course of certain life events or when people fail to establish causes of complex issues such as family conflict, misfortune, poverty and failure to succeed in life amongst other socio-economic reasons. Victims of witchcraft accusations, majority of them women, are faced with traumatic experiences because a witchcraft accusation can at times be a death sentence.

Additionally, the breakdown in kinship relationships within the *ukuzalana* system can be a result of many factors, and not just witchcraft accusations alone. Mndende (2021) argues that kinship within Xhosa-speaking families has been negatively affected by the introduction of Christianity, which led to the undermining of indigenous forms of spirituality that held the kin bonds together. She further argues that the breakdown of Xhosa indigenous spirituality can have detrimental effects on the state of kinship relationships which can in turn lead to conflict within the kinship group. She makes an argument for the rekindling of indigenous spirituality as a form of mending these broken kinship relationships. This theme will be explored in detail in the following chapter.

In the following chapter, I present personal narratives of how in my family, issues of family conflict resulted in immense trauma that was further exacerbated by the disruption of family ties. Some of these conflicts stem from intergenerational substance abuse as well as the misrepresentation of Christianity as being in opposition to indigenous spirituality. Consequently, my family and I utilized indigenous healing cosmologies to manage some of the trauma and to foster reconciliation within the broken family space, in alignment with the argument made by Mndende (2021) that indigenous spirituality can play a significant role in the mending of broken kinship relationships. However, it is important to note that in some instances indigenous spirituality can help to resolve conflict within the kin group, but it can also exacerbate traumas if the underlying issues are not adequately dealt with.

Additionally, in this next chapter I explore the role that water divinities play in the healing of such complex traumas, particularly in issues of family violence. The chapter also presents a case study that highlights the important role that such water divinities play not only in resolving conflict within families but also at the community level in general. The complexity of water divinities as entities that assist in conflict resolution is explored and placed within the context of the concept of morality is understood within the Xhosa cultural framework. I make the argument that it is within the context of shared morality that healing cosmologies such as water divinities are understood to exert their influence on the lives of the families and communities they assist during times of crisis.

CHAPTER 7: Cultural concepts of morality and the role of water divinities in the maintenance of stable relationships

7.1 Introduction

This chapter examines the cultural understandings of what constitutes morality within the Xhosa context, particularly as it relates to maintaining stable relationships. The complex notions of 'relatedness' as they extend beyond human genetics will be explored in the context of the role of nature in shaping social relationships and wellbeing. Additionally, the impact of modernization and capitalism have presented new challenges to understanding cultural constructs of relatedness. The anthropology of ecopsychology, as it relates to how Xhosa-speaking people conceptualize the role of non-human beings and the natural environment in shaping human wellbeing will be applied in examining this dynamic. The role these challenges have played in shaping Xhosa discources of morality will also be examined. Three case studies (5,6 and 7) will be presented under this conceptual framework.

The first case study presented in this chapter is one in which I had a dream that I received following an incident of violence in my family. A close relative attacked and murdered our family members in November 2023 in a drug-induced rage. My relative was a troubled young man who struggled to fully integrate into the structure of the clan and as a result developed a heavy addiction to drugs and alcohol. He would at times get intoxicated and go on a rampage, expressing his frustrations about the lack of unity in the family unit. His frustrations stemmed from the fact that members of the family group did not get along with each other. These internal conflicts affected attempts of group healing rituals that were meant to address the wellbeing of the entire group but often failed due to improper observance of rules. At these rituals, family members would get into arguments with each other, often resulting in the ritual being cancelled or aborted midway. This caused a lot of frustration for many of us within the family.

It is important to note that in this story, the relative is anonymised because he did not offer consent for his identity to be revealed (directly or indirectly) in the telling of the story as he is currently in prison serving his sentence. For ethical reasons, he will be referred to as a 'relative'. Other surviving family members who feature in the story were able to give their consent. Th permission to refer to deceased family members was received from these surviving members.

Thematic framework 3: ***The role of water divinities in healing and aiding in reconciliation***

Case study 5: The story of my family trauma

On the day of the incident, my relative got intoxicated and went on a violent rage, stabbing our family members to death. In the rampage, he killed a close older female relative and severely injured an older male relative and our parents. The older female relative died immediately but the older male relative passed away a few months later from his injuries. Our parents were rushed to the emergency room and are unfortunately the sole survivors of the attack.

My relative began his attack in our grandfather's homestead (the great homestead), where my father and his siblings grew up. In the Xhosa culture, the grandfather's homestead is regarded as the most sacred homestead in all the lineage. In our case, my father's homestead exists because our grandfather's homestead exists, thereby creating a power dynamic in which the grandfather's homestead holds more power and prestige within the family. My relative was looking after the family livestock and hence was living in the great family homestead at the time of the attack.

On this fateful night, he walked into the kitchen whilst my older female relative was in her bedroom and proceeded to take a knife and stabbed her twelve times to death. Due to having both of his legs amputated, my older male relative could not flee and was therefore vulnerable. My relative stabbed him seven times in his bed as well. After he had stabbed both my older relatives, he proceeded to move to my father's homestead. This house is two houses away from the great homestead. He broke in through the bedroom window and started to attack my father.

My father is a retired police officer and so he was able to fight back. In a desperate attempt to stop the attack, my mother jumped on top of my father and used her body as a shield. She received several stabs on her back. After my father fought him off, my relative went out of the main door and took himself to the village police station where he surrendered himself. My mother called out to neighbours, and they were able to come and help. My parents were taken to the emergency room at the nearest hospital. By the time the police arrived at the great homestead, my older female relative was dead, however my older male relative was alive but in a critical condition. He died six weeks later from associated injuries.

My parents have attended one therapy session and refused to go back for another. When I enquired why, they explained that the whole concept of talking to a stranger on a couch is too foreign for them and they do not see the benefit.

The history of addiction in my family

It is important that I note that my relative was adopted by our parents when he was two years old. His birth father is my father's close family member who died when my relative was a toddler. Before his death, my father's close family member had asked my father to take in the little boy and to raise him, to which my father agreed. It is common in Xhosa-speaking families for people to raise their close family members' children in the event of death. Growing up, we did not know that my relative was adopted because the family never shared that information with us. We found out that he was adopted when his birth mother died. Both of my relative's birth parents were alcoholics and the cause of death for both was alcoholism. Alcoholism runs through our family, with my father being a recovered alcoholic himself, as well as his older brother who was the family patriarch.

Kelly & Kowalyszyn (2003) state that indigenous families that struggle with alcohol abuse tend to struggle with family cohesion and conflict. They argue that as opposed to non-indigenous groups, "in indigenous groups the nature of the association of family problems, alcohol expectancies, and heavy drinking may be different given cultural differences in family life, structure, obligations, and drinking contexts" (Kelly & Kowalysyzn, 2003, p. 761). The decline in family cohesion can have detrimental effects on the safety of the household, even leading to family violence. Davis, Rotheram-Borus, Weichle, Rezai, & Tomlinson (2017) argue that in the South African context, alchohol abuse plays a role in half of deaths that occur in the country. Unfortunately, my family's struggle with family violence caused by addition is one of many in South Africa.

My father's surviving older brother healed from his alcoholism when he joined an evangelical church, which is known as a 'saved church' in our community since its primary teachings are salvation through the acceptance of Christ. Its members state that they have been 'saved' by joining the church. However, the church has a controversial relationship with the community because they teach that ancestors are demons, and that indigenous systems and spirituality are demonic. After my uncle joined the 'saved church', he removed himself from the family in what he called a 'family divorce' because we practice African spirituality. His reverend and leader of the saved church came to our homestead to perform a strange ritual which he called the 'family divorce ritual'. He brought with him a kudu horn, which he blew facing all the four corners of the homestead. He said he was doing this to remove my uncle, his congregant, from the "demonic ties" of the family.

Following the ritual, my uncle burned all the family relics that were left in his care such as the beads and the blanket that he wore during family ceremonies. This did not sit well with our family because

those relics were a sacred part of our family history and traditions. The family was torn apart by my uncle's decision to get 'saved' because on one side the family was happy that he had stopped drinking, but at the same time were unhappy about the way he was going about it.

During my *ukuthwasa*, my uncle refused to attend any of the rituals the family performed for me, citing that they were demonic. As an older brother in my father's patriline this was problematic as the rules required that he be the leading officiant of the ritual. He even went as far as to accuse me of being a witch because I practiced indigenous spirituality. He banned me from visiting his house and banned my cousins from visiting our home in fear that they would be infected by my so-called 'witchcraft'. My uncle passed away a few years ago, but still to this day my cousins refuse to participate in family rituals. We are still in communication with each other as cousins, but our relationship is strained when it comes to issues of indigenous spirituality. So, to keep the peace, we usually avoid such conversations when we are together.

The issue of Christianity creating a rift in my family is unfortunately not a unique situation. Literature suggests that amongst Xhosa-speaking people Christian beliefs undermine indigenous spirituality and can at times influence the causality of witchcraft accusations and the thus the breakdown of families (Mndende, 2021). In his study of the rise of Christianity amongst the Xhosa-speaking people of the Eastern Cape, Mokhoathi (2021) argues that "the synthesis of Christianity and African Traditional Religion among the amaXhosa tribes of the Eastern Cape appears to have been an age-old problem of the Christian church, beginning with the missionary epoch, and up to contemporary times, and it is still not acknowledged" (Mokhoathi, 2021, p. 149). In my family, my uncle's Christianity played a key role in exacerbating the family conflicts and caused a bigger rift in the group as he was the eldest member of the family and hence his exit in such a manner greatly undermined the wellbeing of the entire group.

The degree of family violence that happened in my family did negatively influence my mental health. I struggled from alcoholism myself and went into treatment in early 2024. It was from the backdrop of all this trauma that I received a dream pertaining to the trauma that had occurred in my family.

In my dream, I saw myself in a small cottage alongside a dusty crossroad. I was in the kitchen preparing a meal and I was dressed in a short blue and pink dress. My older brother was in the house with me but was taking a shower in the bathroom. As I was cooking, a man walked towards my door. He had a very blank expression on his face and a lifeless look in his eyes. He stood outside of the door and stared at me. He then proceeded to force his way into the house and attacked me. He attempted to rip my dress off and to sexually assault me. I screamed to my brother for help saying "brother, please come

and help me. This man is trying to rape me". My older brother swiftly emerged from the bathroom, holding a sharp knife in his hands. He started to stab the man. As soon as I broke free from the man's grasp, I quickly picked up a knife as well and proceeded to stab the man. My brother and I stabbed him to death.

The dream then moved to me being at a meeting with a group of executives of a company. In the meeting, they asked me to serve as an ambassador for a program they were initiating to combat gender-based violence. They told me that they had heard about the attack that happened and how I survived. They told me they wished to help other women in my position by advocating for women who use self-defence when being violently attacked by men. They proceeded to ask me how I was able to defend myself from the attack, to which I responded, "I got help from Artemis". After the meeting, I travelled back to my community where I was invited to a meal with a group of Xhosa-speaking women. We were served fish by the woman who had caught the fish. She explained that she was serving a river fish and that it is highly nutritious and nourishing. She had cooked the fish in a tomato sauce and served it with freshly baked bread.

This dream was particularly revealing for me because severe acts of violence had taken place in our family, and thus I placed high value in the symbolism from the dream. However, I was uncertain about who Artemis was and how she related to my culture. I shared the dream with a colleague who suggested that I read up on Artemis, and in my research, I found that "in Greek religion she was the goddess of wild animals, the hunt, and vegetation and of chastity and childbirth and that she was identified by the Romans with Diana. Artemis was the daughter of Zeus and Leto and the twin sister of Apollo. Among the rural populace, Artemis was the favourite goddess. Her character and function varied greatly from place to place, but, apparently, behind all forms lay the goddess of wild nature, who danced, usually accompanied by nymphs, in mountains, forests, and marshes" (Brittanica, 2024).

I started to wonder about the dream and whether the goddess Artemis was related to the deity known as *Inkosazana* in Xhosa and Zulu cosmology. The *Inkosazana* is also regarded as the deity of nature, vegetation and fertility, much like Artemis is considered in Greek mythology. Amongst the Zulu people, the goddess of fertility is also known as *uNomkhubulwane***,** who is also the goddess of rain, nature and fertility (Berglund, 1976; Bernard, 2008, 2010). Much like Artemis**,** *Nomkhhubulwane* is the daughter of a supreme God. Throughout my calling and in my spiritual work, I work closely with the Xhosa goddess *Inkosazana* as she often appears in dreams as a mermaid. She has appeared to me in times of

distress and pain to act as a guide, mother, nurturer and caretaker, especially during my training to become an *iTola*.

I consulted with my *iTola* mentor about the dream, and he regarded it to be a message from the *Inkosazana*, directing me to address the trauma caused by the violent attack that occurred in my family. He explained that the *Inkosazana* can appear in many forms and by many names. I had the dream in September, known culturally as *EyoMsintsi* (month of the coast coral tree), which amongst the Xhosa-speaking people is the month of the spring equinox.

The spring equinox in the Southern Hemisphere is a time of renewal, and a time of the yearly cycle is sacred to the *Inkosazana*. According to my mentor, when family violence occurs in the hands of a family member, the spiritual ties between the living kin and the ancestors becomes compromised. If these spiritual ties are not fortified then the trauma will seep into all spheres of life within the family, resulting in compounded trauma. He advised me to make an offering to the water to the *Inkosazana* and her namesake Artemis so that the thorns of suffering under my family's feet can be removed and that healing can occur between us and our ancestors. At the river, I made an offering of flowers, seeds, beads and shiny coins. Days following my visit to the water to make an offering to the *Inkosazana*, I received another vivid dream.

In the dream, I saw myself in my grandfather's homestead where my relative had attacked the family. I saw the family in the kraal, where we were performing a sacrificial ritual involving a goat. There was also another healer in the dream who was conducting the ritual.

After waking from the dream, I called my parents to let them know what I had seen. They suggested that we consult with the elder again to get insight about the meaning of the dream. The elder suggested that the dream was showing the need for a cleansing ritual to take place in the homestead to lift the dark cloud that was over us to reintegrate our family back into the community. He explained that after something as traumatic and bloody such as what happened to us had taken place in a community, it is customary that the affected family be cleansed to lift the dark cloud. My family agreed to perform the ritual since the dark cloud that engulfed us had started to influence our family's relationship with the community.

Some people refused to visit our homestead in fear that they would be polluted by the dark cloud, known culturally as *isimnyama* (the darkness). Culturally, it is taboo for families that have *isimnyama* to intermingle with the community out of fear that they will infect other people with the *isimnyama*. So,

my family was isolated from the community following the violent attack. The aftermath of the event caused emotional and psychological harm to us as a family. My mother owns a beer barrel that is culturally known as “ifatyi” that is used to brew *umqombothi* (traditional beer). She is one of a few women in the village that owns *ifatyi* due to the high cost of buying one and as a result many women in the village often borrowed her *ifatyi* when they needed to brew umqombothi for their family rituals and ceremonies. After the attack, my mother recounts that nobody wanted to borrow her *ifatyi* and it remained unborrowed for eight months although rituals were taking place in the community. She thinks that the fear of being contaminated by our family’s *isimnyama* led people to not borrow her *ifatyi*, further leading to the feelings of isolation my family was experiencing.

Following the advice from the elder, my parents consulted with a traditional healer to receive guidance on how to cleanse the *isimnyama*. The healer suggested that a goat sacrifice be offered to appease the ancestors who have also been traumatized by the attack as was shown in my dream. A date was set for the ceremony, and it was performed under the guidance of the traditional healer. Following the cleansing ritual, my mother stated that people started to borrow her *ifatyi* again because the *isimnyama* had been cleansed and lifted. The ritual allowed for my family to reintegrate back into the community after months of isolation.

The elder who suggested I make an offering to the water divinities explained that the *iNkosazana* is a being that is often called upon by Xhosa people to ask for healing, guidance and support through times of difficulty. As he puts it, “abantu basemanzini banyanga intlungu ngoba abazithandi igazi kunye neenyemebzi” *(the water people heal pain because they do not like blood and tears).*

The notion of water divinities being sensitive to the spilling of human blood has been reported by Hoff (1997) in his study of Khoekhoen and !Xam indigenous people of South Africa, citing that water divinities are “portrayed as aggressive towards human smells, especially the smell of blood, which is regarded as particularly potent” (Hoff, 1997, pg. 27). Furthermore, research has shown that water divinities, ritual and ancestral communication are utilized in Xhosa-speaking families as methods of healing (Bernard, 2013). Pain, in one form or another, is an insuperable part of everyday life. It is probably the most common symptom in clinical practice. However, how people perceive and respond to pain can be influenced by their cultural and social backgrounds.

As Helman (2000) suggests, how and whether people communicate their pain to health professionals and to others can also be influenced by social and cultural factors. It is fitting that in this chapter we

should examine how Xhosa-speaking people understand and respond to pain, both in themselves and in others. To do this, we must first understand the ancestral knowledge on which the Xhosa health model is based on.

Ngubane (1977) suggests that before looking into the activities of the ancestors, we must first consider the other "beings" in the other "other world" and inquire to what extent they come into the picture of health and disease. She makes mention of an aquatic being known amongst the Zulu people as *uNomkhubulwane*, sometimes called *Inkosazane* as part of the divine beings of the "other world". Culturally, the *Inkosazane/uNomkhubulwane* is associated with womanhood, the fertility of people, land and animals. The cultural rites of the *Inkosazane* were usually celebrated annually during the spring season, with all rituals performed by married women and maidens. Other anthropologists such as Bernard (2013) have written extensively about these beings of the other world (Bernard 2008; 2010;2013).

Common themes that recur in the descriptions of the underwater experience include encounters with a giant snake that is often described as resting on white clay, a fecund woman suckling infants, and ancestral spirits in their anthropomorphic and/or snake form. The woman encountered is often described as having a fishtail (Gluckman 1954; Kendall 1999; Krige 1968). Bernard (2013) demonstrates the importance of social and familial aspects in the lives of indigenous people when they are attempting to make sense of their health and spiritual experiences.

In my own experiences as an indigenous person who is a healer, I have grappled with understanding the relationship between the ancestors, water divinities and wellbeing. My experiences have allowed me to gain a more nuanced understanding of this link, especially in the way it manifests in relationships with self and others. Working with water divinities such as the *iNkosazana* deeply broadened my understanding of what culturally constitutes pain within Xhosa cosmology and how that pain can be addressed and healed. This is because water divinities play a role in healing trauma amongst Xhosa-speaking people.

Xhosa-speaking people refer to the existence of other species of people who reside in the waters of the rivers and ocean. These beings are known as *'abantu bomlambo'*. They are understood to be members of a species that is part-fish and part-humanoid, and who are the children of the *iNkosazana* as they resemble her in appearance**.** The *abantu bomlambo* are considered to have a very special relationship

with the ancestors in the sense that they co-operate with the ancestors in delivering messages from the ancestral dimension and also assist in the education of some indigenous healers (Joseph, 2021).

Additionally, the *abantu bomlambo* are understood to be creatures that can communicate telepathically. It is from this telepathic communication that they assist in the training of an indigenous healer. Many healers who are educated by *abantu bomlambo* talk about it being like a lucid dream where they are visited by a mermaid in their dreams, who then shares information about a particular topic. I am such an indigenous healer that was trained in this way in my *iTola* training. Hence then, the *abantu bomlambo* play a crucial role in my health practice.

The *abantu bomlambo* are treated with great respect by Xhosa communities, especially those that still strongly uphold indigenous knowledge systems, beliefs and customs (Bernard, 2013). The disturbance of the home of the *abantu bomlambo* is disrespectful and it is believed that when they feel disrespected by human behaviour such as the abuse and destruction of natural resources, they act out their anger by causing devastating climatic events such as drought, flooding, and other natural disasters related to the weather. This can lead to the suffering of whole communities and not just the individual who caused the disturbance.

Hoff (1997) argues that among the Khoekhoen and !Xam indigenous people of Southern Africa, the Water Snake is an example of such water divinities and killing them "results in drought or in severe and dangerous rain and lightning" (Hoff, 1997, p. 23). In Zimbabwe, the Juliana movement of the early 1990s saw the *njuzu* water divinities being attrributed to the drought of 1992 because of the "lack of social harmony and abandonment of traditional practices and beliefs" (Bernard, 2003, pg. 151). Thus, as much as water divinities are associated with healing, they can also be forces of destruction depending on the circumstances in which they are exerting their influence.

In his analysis of Mia Cuoto's *Sleepwalking Land* (1992), which is a gripping novel about the Mozambican civil war, Joseph (2024) describes the role of water divinities known as *Nzunzu* "which populate the sea and other various bodies of water in Mozambique" in addressing issues of conflict as "spirits that encroach on the human world, influencing events and problematizing the laws of logic, time and space" (Joseph, 2024, p. 6), thus highlighting the complexity of the cultural perceptions of these beings during times of trauma in the African context. In some South African cultures, water divinities are sometimes referred to as *iNzuza*, and are believed to be spiritual guides that work in conjunction with the ancestors in order to manage wellbeing during times of crisis (Makhanya, 2021). Through

dreams and visions, they guide and equip the traditional healer with knowledge on how to manage illness so as to bring about stability and reonciliation (Chirisa, 2022).

In terms of managing trauma, water divinities are highly valued for the insight they offer in such matters. In times of crisis, water can be used to manage the disruptions that emanate from disturbances in social relationships. According to Masaiti-Mukuka (2024), worshippers in African Indigenous Churches (AICs), "ritualize water as a symbol or medium of appeasing their ancestors who communicate to God on their behalf", thus highlighting the significant role of water spirits in the mending of broken kinship relationships (Masaiti-Mukuka, 2024, p. 91). In *Of Water and the Spirit*, Malidoma Some (1994) writes about how in his life water divinities guided him in his quest to heal from negative and painful experiences that he had endured as a result of forced attendance at a colonial school.

Bernard (2003) states that amongst the indigenous people of South Africa, "water is the essence of both spiritual and physical life, and the spirit world is regarded as the ultimate source of such life-sustaining powers" and thus has the potential for healing (Bernard, 2003, p. 149). Speaking about what he refers to as 'hydro-healing', Orogun (2024) argues that the notion of using water divinities as a healing modality has been recognized by indigenous cultures and religions all over the world and is known to aid in healing following times of deep crisis (Orogun, 2024). In indigenous Nigerian cosmology, the *Nne Mmiri* (*Mami Wota)* belief system in Igbo spirituality is understood to encourage human beings to uphold morality within the home and the community, thereby assisting in times of conflict in order to bring about peace and togetherness (Chuks, 2019).

Among the Yoruba people, *Oshun* is the goddess of water and healing, and is venerated through offerings and rituals in her name. She is the *orisha* (deity) of fertility, love, water and protection of humanity, especially of women. The *Oshun* festival which is observed annualy in Nigeria, places great emphasis on the power of *Oshun* to heal conflict and to "foster socialization and engender psychological and emotional well-being" (Idowu, 1992, p. 192). Following a traumatic incident, or the breakdown of important kinship relationships, many people participate in the festival in order to reconcile their suffering as in this cultural context, "illnesses are viewed as symbolic expressions of internal conflict or disturbed relationships with others" (ibid). Raheem (2024) posist that in Yoruba society, water is revered beyomnfd its physical state and is valued for its spiritual and medicinal properties, and this reverence for water informs the cultural practices that are aimed at aiding reconciliation following times of crisis.

According to Bernard (2013), the power and influence of water divinities stretched beyond the aquatic environment and can influence life on land since “these divinities occupy and move between the subterranean, the terrestrial and celestial worlds, uniting these worlds in a vital cosmic flow of life” further highlighting their distinct role in the lives of human beings as well as the environement (Bernard, 2013, pg. 147). Those traditional healers that are trained by these water diviniites are usually embued with the gifts of healing and can thus assist families and communities that have been affected by crisis (Joseph, 2021).

Additionally, water divinities are also associated with goddesses and women as often they are depicted as female-bodied creatures. As Joseph points out, aligning women “to water and water spirits is an attempt at empowering women” (Joseph, 2021, pg. 9). In Irish cosmology, the goddess Brigid is associated with water and her guidance is evoked through making offerings of shiny coins at the water wells that are associated with her, and necklaces that carry her image are believed to bring about healing powers that ward off sickness.

Likewise, amongst the indigenous people of Armenia, the goddess Anahit is associated with water and is known as the ‘mother of all knowledge’ that pertains to healing (Cornwell, 2021). The idea of the ‘mother’ being a healer is prominent in Xhosa cosmology and is evidenced by the presence of female ancestors who are tasked with the duties of healing broken family spaces and aiding in reconciliation. This divine feminine figure is understood to reside in the water and hence the spiritual affiliation with natural bodies of water with protection, healing and wellbeing. Likewise, in Hindu cosmology, the feminine divine in the forms of *Saraswati*, *Kali*, *Parvati*, *Durga* and *Lakshmi*, is associated with “various qualities and aspects of the divine, serving as symbols of creativity, nurturing, power, and protection” (Padhi, Vijay, & Sandhu, 2024, p. 1443). Connections with the feminine divine through these goddesses can greatly offer empowerment to individuals and society (ibid).

Youvan (2024) argues that the concept of Shakti, “which is in its most universal sense, is the manifestation of divine female power, an omnipresent force that animates life, sustains creation, and transcends the boundaries of the known universe” is the cosmic understanding that drives communities to place high value in the power of the feminine divine and its ability to bring healing, protection and renewal through phenomena of nature, which themselves are expressions of the feminine (Youvan, 2024, p. 2). This universal understanding is observed amongst Xhosa-speaking people as the feminine divine is deeply associated with healing, nature and protection of resources, which can have implications beyond culture and religion.

Much like *Shakti* embodies "encouraging a reverence for life in all its forms and an acknowledgment of the interconnectedness of all things" in Hindu cosmology, the Xhosa concept of *ithongo lamanzi* (water spirits) encourages a similar understanding that is grounded in respect for natural resources, both on land and on water. This reverence for life is observed in cases where the natural environment is placed at risk of major disruption. A recent example involving the association of water spirits with conservation of the environment was observed in a court case tabled in the Makhanda high court in 2021. A Xhosa-speaking community in the Eastern Cape province took the South African government to court over concerns of possible environmental disruption, citing that such disruptions violate cultural law. The dynamics of that case are discussed in the following case study.

Case study 6: *The Shell seismic survey of the Wild Coast*

The Amadiba Crisis Committee (ACC) is an organization that was formed in 2007 by community members of Xolobeni village in the Mpondoland area of the Wild Coast region of South Africa in order resist the mining of titanium on their indigenous land, which would have compromised their pristine coastline. Reports state that other concerns that played a key role in the community's resistance of the mining operation included the possible relocation of people's homesteads which would have affected their sense of place and belonging, as well as the detrimental impact on estuaries and water sources as their village lies in a protected marine area. All these factors were seen as possibly undermining the wellbeing of the community.

The Committee also spear headed the fight against a controversial decision made by the South African Department of Mineral Resources and Energy that sought to allow the oil giant Shell to conduct a seismic survey in December 2021 that would blast high energy sound waves into the ocean that could potentially kill many marine mammals, thus negatively affecting the biodiversity in the area. As an indigenous healer that was initiated on the Wild Coast, having been directed there in a dream, I was asked by my colleagues in the Amadiba Crisis Committee to join their fight and help them by providing evidence that would be used in court to testify about the ways in which indigenous Xhosa-speaking people understand *ithongo lamanzi* and its importance in maintaining the wellbeing of indigenous families and entire communities. In this case study, I detail how people in this area, some of whom are my dear colleagues, understand and utilize *ithongo lamanzi* in the maintenance of personal and community wellbeing.

Shell is an industry oil company that has mining operations around the world, including in South Africa. In 2014, the company was awarded mining exploration rights by the Department of Mineral Resources and Energy which was renewed in 2017 and again in 2021. The rights were awarded under the Mineral and Petroleum Resources Development Act 28 of 2002 (MPRDA), which is a law that requires environmental assessment as well as the relevant authorisation to conduct such assessment. The company argued that as part of its environmental assessment process, it needed to conduct a seismic survey that included blasting high-energy sound waves into the ocean as a mapping technique to determine the level of oil that can be mined from the seabed of the surveyed area. The Amadiba Crisis Committee, assisted by conservation groups, contested this portion of the environmental assessment, citing that the blasting would kill many marine animals that are important for the biodiversity of the region.

Additionally, it is important to note that historically indigenous people in Mpondoland had been subjected to the historical trauma of displacement from their native lands and hence the trauma has been etched into the collective consciousness of the population. Much like many indigenous groups in South Africa, the amaMpondo faced major land loss and displacement from both colonial and apartheid land grab policies that sought to undermine indigenous people's rights to their lands (Beinart, 1979). The people of Xobeleni have themselves, as being part of the Mpondoland region, been affected by these historical policies and hence are sensitive to any attempts to undermine their land rights.

Ntsebeza (2011) asserts that the phenomenon of revolts against land encroachment in Mpondoland is nothing new, and that they are a result of generations of "resentment to colonial and apartheid policies in the rural areas of the former Bantustans" (Ntsebeza, 2011, p. 21). According to Mahlatsi (2018) in what he calls "the peasant's revolt", the Amadiba Crisis Committee emerged from a legacy of revolting against systemic land possessions in the Mpondoland region, and that in essence these "revolts are used as a prism through which to understand the history and context of the ongoing antimining and land struggle in Xolobeni, and the role of both the apartheid and the democratic state in the process of systemic dispossession" (Mahlatsi, 2018, p. 615).

He argues that these historic and contemporary systemic land dispossessions have resulted in negative health status for the indigenous people of the region since Mpondo people have deep spiritual and cultural connections to their land, ancestors and natural resources (ibid). The encroachment of capitalist ambitions into their land further exacerbates this historical trauma. Hart & Padayachee (2013) explain that in the South African context, matters of capitalism and the economy have historically been drawn

across racial lines. This racialization of capitalism creates a situation where the "business sector [is] surrounded by human misery" (Hart & Padayachee, 2013, p. 56). It comes as no surprise then why the people of Xolobeni would associate the interest of the business class in their natural resources to compromised wellbeing. Their distrust of capitalism is deeply rooted in the historical trauma of colonialism and apartheid. Both of which racialized the economy to the detriment of indigenous people.

In addition to the negative impact on the environment, the Amadiba Crisis Committee also cited cultural and spiritual reason for refusing the seismic survey, one being that disturbances in the ocean would upset the *ithongo lamanzi* since *abantu bomlambo* and the *iNkosazane* reside in the water, alongside the ancestral spirits of the people, further highlighting the importance of Mahlatsi's argument.

The High Court in Makhanda ruled in favour of the Amadiba Crisis Committee and declared that the issuing of an exploration right to Shell was unlawful since the company failed to properly consult with the relevant indigenous people prior to its application for an exploration right. The court decision was celebrated by environmental lawyers, activists and indigenous groups alike as it was seen to send a strong message to both government and mining companies about the importance of valuing indigenous people's rights to their land. It also sent a strong message about the importance of valuing indigenous people's spiritual ties to their land, waters and resources, a right that is recognised by the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP). Thus, the debacle about the seismic survey is an important illustration of government's need to consult indigenous communities prior to issuing any contracts to mining companies as failure to do so is a violation of indigenous people's rights.

As part of my contribution to the case, I offered an affidavit detailing how indigenous healers understand and work with the *ithongo lamanzi* in the maintenance of wellbeing of indigenous individuals, families and communities. This is knowledge that I came to possess through my training as an *iGqirha* and *iTola* through the guidance of my ancestors. *Ithongo lamanzi* is understood to be the collection of ancestral spirits, guides and divinities that reside within the water realm and from whom knowledge regarding the healing of illness can be ascertained through dreams and ritual practices. According to ceramic artist Andile Dyalvane (2020), Xhosa-speaking people understand *iThongo* to be an "ancestral dreamscape" which is a medium through which "*uYalezo uLwimi lwabaPhantsi*" (messages from the ancestors) are transmitted to the world of the living. Therefore, the *ithongo lamanzi* is understood to be a communication medium by which people connect to the ocean and rivers of the land as a form of accessing divine healing knowledge that can be used in the maintenance of wellbeing through the spiritual practices of the group.

The *ithongo lamanzi* is known for taking people under water for initiation, to a place that is described as a hybrid zone between life on land and life below the surface of the water in a process that is known as *ukuthwetyulwa*. In this zone, there are huts, fields and gardens where food is planted and livestock that people use for farming and eating. The underwater world is described by those who have visited it as being reminiscent of life on land, except that in what would be the sky on land, there is a deep pool of water such that when one looks up, they see water instead of the sky. It is in this land-water zone that "they are taught the art of healing and the ability to communicate with the spirit world" (Bernard, 2010, pg. 117). Upon returning to land, these people operate as healers and diviners that assist in healing various aliments either through medicinal herbs or through rituals aimed at connecting the patients to their ancestral spirits which then offer the remedy. However, some people are not taken under water physically but rather experience the process through their dreams in what is known as *ukuthwetyulwa ethongweni*, which loosely translates to 'being taken underwater in a dream'.

In such cases, the individual experiences the underwater world through their dreams, and receive their training in divination and herbal medicine this way. Such experiences are usually facilitated through a series of rituals known as *umhlwayelelo* or *imfukamo yasemanzini*, which are initiation rituals that are performed by the ocean or river as per the instructions of the ancestors. The exact location where the ritual must be performed is revealed to the healer in a dream, the dreamer is usually accompanied by their mentor and family members to the site where the ritual is to take place, and they stay there for a duration of three days or longer depending on the instructions from the dream (De Jager & Gitywa, 1963).

I am such a healer and was taken under water in my dreams where I was educated in divination and the use of herbal remedies in the form of *itasi*, which is a medicine bag that is passed down through generations within a particular family line of healers. This medicine bag is a family relic that contains all the sacred remedies of the kin group, inherited from an ancestral predecessor. After my *imfukamo* at the ocean on the Wild Coast, my family slaughtered a goat for me, where I was formally acknowledged as the current holder of the family *itasi*. As a healer, I utilize the medicines in the *itasi* in my work as an *iTola*, where I assist individuals and families that have been affected by traumatic events by either bathing them in herbal mixtures or by conducting ritual to help them manage the spiritual effects of the traumatizing incident. Many of my colleagues in the Wild Coast received their training in a similar fashion and utilize their medicine bags similarly.

The Amadiba Crisis Committee, my mentor and I presented this information to the lawyers that were handling the case as evidence of the cultural significance of the marine environment in the both the

training of healers, as well as the attaining of knowledge from the water realm for the purposes of healing and maintaining community wellbeing. In addition to citing the significance of *ithongo lamanzi* in the training of healers and how the sacredness of the water assists in this, the court affidavit also made mention of the environmental importance of the connection between people and water divinities in the maintenance of social order and morality. Xhosa-speaking people regard the natural environment to be determinant of health in the sense that the indigenous Xhosa health model considers the imbalance of the relationship between people and nature to be the cause of ill-health (Mji, 2013).

To maintain wellbeing, Xhosa-speaking people uphold a stable relationship with their natural environment by respecting nature and not disturbing critical ecosystems. The Shell seismic survey had the potential to disrupt this balance by eliminating marine biodiversity, which in the Xhosa cultural context is understood to be a violation of the indigenous health model. A disruption of this magnitude would not only affect the living human beings but would offend the ancestors and divinities that preside over the marine realm. If this were to happen, then the wellbeing of the entire community would be compromised. It was from this space of shared morality that the Amadiba Crisis Committee made their plea to the judge, who eventually ruled in the favour.

The concept of shared morality as a determinant of community health has been described by Durkheim (1973) as an "attachment to something other than ourselves" that facilitates how human beings relate to each other in a society (Durkheim, 1973, p. 151). He further argued that in a healthy society, moral growth can be regenerated and nurtured through a pedagogy that focuses on collective interests, efforts and altruism, where the group's collective consciousness is a driving force in maintain healthy bonds. This idea differed greatly from that of Karl Marx (1988) who viewed morality as laden with issues of power and subjugation of the lower classes by the ruling classes. However, the Amadiba Crisis Committee made a strong case to the judge about morality as a pedagogy in their community, and hence why it was important to protect the natural environment as a means of protecting the social relationships that hold the community together. The following thematic framework explores the concept of morality within the Xhosa context, particularly as it relates to matters of individual and community wellbeing.

Thematic framework 4: *The Xhosa cultural understanding of morality and its role in maintaining wellbeing*

The anthropology of ethics and morality is a widely studied concept in anthropology. According to Mattingly & Throop (2018), anthropologists have sustained a varied and active engagement with ethics and morality throughout the field's history and that recently there has been a widely heralded 'ethical

turn' in the discipline although there is a lack of clarity as to why it needs its own 'turn', or what terminology one should use when speaking of or analysing ethical life (Mattingly & Throop, 2018). Before the turn, anthropologists who explicitly wrote about morality and ethics largely assumed the category itself to be self-evident (Csordas, 2013).

In his work, Csordas (2013) defines morality as a cultural system. From this perspective**,** he presents the necessity to confront the problem of evil as an anthropological problem. He describes evil to be perceived not only as an emic/indigenous/local category or as an etic/analytic/cross-cultural category, but rather as an immediate existential sense. This means that "while the specific practices, assumptions, ideas, beliefs, values, rules, duties, and happenings deemed to have moral significance could vary quite drastically from one community to another, the enveloping category of morality or ethics itself is held to be visible and thus ethnographically traceable" (Mattingly & Throop, 2018, p. 478). Csordas (2013) argues that to ignore the issue of evil is to dodge the question of morality because if it wasn't for the existence of evil, how would people know what is good? Ngubane (1977) presents a similar argument when it comes to the issue of evil amongst the indigenous people of South Africa.

According to Ngubane (1977), for indigenous South African people, evil is associated with the presence of witchcraft. She argues that without witchcraft, then indigenous concepts of morality would not exist in the sense that witchcraft presents the possibility of an enemy for which indigenous health knowledge offers methods to diffuse. She argues that the divination processes by which traditional healers detect witchcraft are formed from the central core beliefs of what constitutes good and evil. Hence, the presence of healers and diviners in indigenous communities plays a crucial role in the neutralization of 'evil' for the benefit of the community.

In the case of the people of Xolobeni, their plea to the judge that the ocean plays an important role in the training of healers and diviners in maintaining wellbeing is testament to the importance of the presence of traditional healers, and hence the protection of the spaces where these healers receive their medical training and knowledge. The assumption of many moral relativists is that while morality does in fact differ from society to society, there is only one morality, or at least one predominant morality, within a particular society (Zigon, 2008).

In his work, Zigon (2008) emphasizes the interpersonal level in which moral life breaks down and must be restored by self-conscious ethical work. That is, when the individual's own perceptions of right and

wrong breaks down, then it needs to be replaced by self-conscious ethical work to restore the lost sense of morality.

In discussing what he terms as "moral regeneration within Xhosa society", Ntombana argues that Xhosa-speaking people contextualize morality within the framework of *ubuntu*, which is a system of collective consciousness that is grounded in indigenous cosmology. In essence, he describes the Xhosa concept of ubuntu as "an institution of values and good morals" that extends beyond human relationships but also takes into accounts the relationships between people and nature (Ntombana, 2011, p. 635).

The notion of '*ubuntu* as a system of morality' has been described by some participants in this study, and its relationship to wellbeing is explored in the following case study. In this case study I present the life story of the key participant, an indigenous healer who is an *iTola* from the Wild Coast, whom we shall refer to by the pseudo name Tata. As an elder, Tata serves the role of guiding individuals and families in the Wild Coast through the process of healing, ritual and ceremony. He also supports the community by deciphering dreams to retrieve their meaning. Our conversation centred around the concept of morality in the Xhosa cultural context, and how social relationships between people, land and ancestors, form the key basis of morality. Tata makes the argument that in the Xhosa cultural context, morality cannot be separated from people's relationship with nature because it is from the natural environment that people derive their medicines, dreams and ancestral communications that maintain wellbeing.

Case study 7: *A Xhosa elder's understanding of morality*

Tata was born and raised in the Wild Coast region of the Eastern Cape province, and comes from the Mbamba and Thangane clan, who historically were known to be fierce warriors. His family lineage has an interesting beginning that is deeply grounded in the indigenous cosmology of the region. Tata recites the story of his lineage as follows as he was shown in a dream by his ancestors.

Generations ago, there were a group of women who were collecting firewood at the local forest. As they were collecting the wood, they came across a very large pumpkin on the ground. The women gleefully approached the large pumpkin with excitement as pumpkin was a valuable food source at the time. The women took out their axes in preparation to cut open the large pumpkin so as to share it amongst themselves. As they prepared their axes, the pumpkin suddenly burst open. To their surprise, the women saw a human infant inside of the pumpkin. The women screamed out load in shock and fled the scene,

leaving behind their axes, firewood and baskets. They ran towards the village screaming and shouting for the men to come and see this phenomenon. The men of the village quickly gathered and went to the forest to investigate.

Indeed, when they arrived in the forest, they saw the large pumpkin the women had described, burst open. They approached the pumpkin to closely examine it, and as they approached, they indeed saw the child inside of the pumpkin. The men had a quick discussion about what to do and it was decided that the Chief must be informed and brought to the site so that he can witness this himself. A few men stayed behind in the forest, whilst some went to the royal residence to inform the Chief of what was going on. The Chief decided to come to the forest to see this miracle for himself. Upon seeing the child inside the pumpkin, the Chief named him Thangane, which loosely translates to 'The little pumpkin'. It was decided that the Thangane child would be taken back to the royal homestead to be raised by the Chief and his household. This is how the Thangane clan came to exist and this is why throughout history they have always been associated with the royal house.

Tata himself today has very strong ties with the royal household in his community, just like his ancestors before him had. His received his calling to be a healer through his dreams and was initiated by his ancestors through dreams. He describes his calling as follows.

In his dream, he saw himself waking up in the middle of the night to the sound of a thumping sound outside. In the dream, he went outside to take a look and standing outside of the family kraal was a tall man who was wearing a long black coat, and standing next to him was an ape. The old man told him that he is being called to take the itasi (medicines) of his ancestors and heal the nation using it. The old man told him he must slaughter a goat and take the itasi. In the dream, he saw himself in a small hut near the river where he was being given blue and white beads to wear around his neck.

Tata shared his dream with his family, who helped him to plan for his goat sacrificing ceremony where he was officially given the *itasi* of his family. In his interpretation of the various ways an *iTola* is called, he asserts that one must dream of both the land creatures and the water creatures, thereby connecting to both the spirits of the land and those of the water because that is what an *iTola* does. He explained that an *iTola* is a bridge between the realms of land and water, and of ancestors and living kin. It is from this relationship that I have been able to learn from Tata about his methods of healing trauma in his community. His methods are centred around the use of *Ubuntu* and moral regeneration as a tool of addressing conflict and of fostering social cohesion. Below I present a summary of Tata's understanding

of what moral regeneration is and how *Ubuntu* can be used as a tool of reconciliation and maintenance of wellbeing.

Tata's methods of practice

Defining 'morality' can be a challenging thing to do because understandings of morality vary across cultures, making it difficult to have one succinct definition for all humanity to adhere to. In the South African context, morality is viewed as a system of healthy human relationships, with the common saying of *'umuntu ngumuntu ngabantu'* (a person is person through other people) summarizing the general attitude towards morality within South African society (Ntombana, 2011). The concept of having one's humanity yoked with the humanity of others serves to create a system where all members of society treat each other with mutual respect and dignity. In essence, *Ubuntu* teaches people to that you must treat others the way you would like to be treated (Ainslee, 2014).

Amongst the amaBomvana people, where Tata works as an indigenous healer, there is a small grassroots movement that he has initiated. His vision is to see a Bomvana society that adheres to the values of *Ubuntu*. Hence, he started the moral regeneration initiative in his community. His community lies on the Wild Coast region of South Africa, surrounded by lush forests and magnificent beaches and coastline. However, the area is highly rural and due to bad road networks, remains isolated from the urban areas. The area only has one hospital for a population of over 80 000 (May, 2019). The local clinics are understaffed and inadequately supplied. There are currently no ambulance services that operate in the villages of the area, making access to emergency care extremely challenging. Elders and traditional healers often serve as the primary care givers in moments of medical crisis.

Like many other rural areas in South Africa, the area is plagued by poverty, high unemployment and lack of basic services. Gender based violence is also high, as well as other forms of violence such as rape and stabbings. The community also suffers from alcohol abuse and drug addiction, mostly amongst the youth. The increase in drug use has also been coupled with the increase in crime and violence in the area. The elders account this on the high levels of unemployment and lack of opportunity amongst the youth (Ohajunwa, 2021). It was from this backdrop that the initiative of moral regeneration was born in Tata's community.

According to Tata, the elders and traditional healers in his community believe that these issues have resulted due to the loss of *Ubuntu* in the community, largely because of the undermining of indigenous belief systems brought about by modernity. He describes the loss of *Ubuntu* as having resulted in the

loss of value for human life, which further exacerbate the challenges faced by the community, citing that “abantu bethu balahlekelwe bubuntu babo. Lonto idale isizwe esingenaxolo, esikhohlakeleyo nesigulayo. Ukuvuselela ubuntu bethu kunyanzelekile ngoba ngaphandle kobuntu, isizwe sizokufa” *(our people have lost their ubuntu. This has resulted in a society that lacks peace, that is cruel and that is sick. It is important that we restore our ubuntu, otherwise our society will die).*

In his understanding, Tata describes the loss of ubuntu as leading to compromised wellbeing. This raises the important question of how can Ubuntu be regenerated? According to Tata, the key lies in the adoption of the indigenous health model which places *Ubuntu* as a major health determinant factor. Within Bomvana cosmology, illness is not merely the absence of disease but is also a psycho-spiritual phenomenon. This means that amongst the amaBomvana, medicine needs to address both the physical and spiritual elements of illness. This holistic approach to health and wellbeing places the amaBomvana in a position where *Ubuntu* can act as a key health determinant. Tata explained the concept of moral regeneration as a means of fostering the understanding of Ubuntu in the community by connecting people to nature (*indalo).*

He describes the natural environment to be comprised of key factors. They are;

- *Umhlaba* – the earth
- *Imilambo* – the rivers
- *Amahlathi* – the forests
- *Izilwanyana* – the animals
- *Abantu* – the people
- *Umoya* – the spirit

According to Tata, when one knows and understands the self, then one can honour their dignity and the dignity of other beings that are part of *indalo*, citing that “Umntu kwamela azai yena kuqala ukuba ungubani. Ngozazi, uzakwazi ukuzihlonipha nokuhlonipha abanye abantu nendalo kanjalo” (*a person must first know themselves. From self-knowledge, the person can learn how to respect themselves, others and the natural environment).* To achieve this, Tata suggests that the community must practice compassion that is unconditional and that includes all living things, including the rivers, oceans, forests

and caves by looking after the natural environment for sustainability. To put it in his words, “indalo bubomi. Ngaphandle kawo sizakugula sife. Ukunakekela indalo kukunakekela ubomi” (*The environment is our source of life because without it, we would all get sick and die. Therefore, looking after nature is looking after creation itself).*

According to Tata, elders are very important people because they are the walking libraries of the community. They have valuable knowledge and wisdom that the community needs to thrive, citing that “abantu abadala kwafuneka bayazi imveli, amasiko nezithethe bazifundise eluntwini” *(elders know the history, culture, traditions and rituals of their forefathers and teach this knowledge to their families and community).* He further adds that they will do this by participating and sharing their knowledge and skills with the younger members of the family and community.

Additionally, Tata adds that indigenous healers have the responsibility of looking after the wellbeing of the people in the community by working as individuals in their individual practices, and collectively according to the gifts they have been given by the ancestors. In his words he adds that “iinyani zinoxanduva lokuhlonipha indalo ngoba ulwazi lwabo lokunyanga luvela kumdali” *(healers have an obligation to be kind to nature because the gifts they have been given are themselves dependent on nature and come from the creator).*

According to Tata’s understanding, alongside indigenous healers, indigenous leaders also play an important role in maintaining social cohesion and stability. He states that indigenous leaders are representatives of the ancestors; therefore, they must conduct themselves with self-respect and dignity. He adds that “iinkokheli zemveli zibalulekile ekuvuselenini uluntu lwethu ngoba babekwe ezihlalweni zabo zizinyanya. Njengoko, banoxanduva lokujongana nempilo yomphakathi ngokusebenzisana norhulumente ngedlela efanelekileyo” *(indigenous leaders are placed in their positions by the ancestors of the land, and therefore they have a responsibility to look after the interests of the community by engaging with the government to effectively resolve community problems and needs).*

In Tata’s perspective, indigenous leaders have a responsibility to ensure the protection of cultural customs, rituals and traditions by promoting equality and safety for everyone to participate in the culture, and that this practice is itself a form of moral regeneration.

As this case study presents, Tata’s understanding of what constitutes *ubuntu* plays a key role in how he addresses wellbeing in his community. From his understandings of moral regeneration, he can guide on the key steps that need to be taken at both the family level and at the community level to bring about

change. Below I present a story that Tata shared regarding a scenario where he had to apply his understanding of *Ubuntu* to manage the traumatic incident that had occurred.

As Tata explained, the traumatic incident came in the form of a big storm that had swept through the village. It thundered and rained heavily on the night of the incident, and during the middle of the night, a woman from the village had an episode where she started screaming in the middle of her kitchen. In her state of panic, she ran outside and ran towards the forest although it was dark. Her husband chased after her but could not find her in the darkness of the night, so he called over his neighbours and told them what had happened. The men took their torches and went looking for the woman in the forest. They searched well into the early hours of the morning but could not find her.

The woman was eventually found sleeping at the gate of a local traditional healer, 5 km from her house at dawn. The healer opened the gate and let her in to diagnose. He asked her who she was, but she could not speak and seemed frazzled and dazed. The healer is a friend and colleague of Tata, so he called him to inform him of what had happened. Tata went to the healer's homestead and they both discussed a way forward. It was decided that the woman's husband must be informed that his wife had suffered from a phenomenon known as *ukwaphuluka* and that she would need immediate medical attention with the use of herbs.

As Tata explains, *ukwaphuluka* is a trauma response that comes in the form of extreme anxiety and panic attacks, and in its extreme stage the sufferer can get into a state of frenzy and psychosis. In a way, *ukwaphuluka* happens when a person's traumas are triggered. Tata explained that the thunderstorm might have triggered the woman's fears, spiking her anxiety to the point where she got a panic attack. That would explain the screaming and the running to the forest in the middle of the night. Tata and his colleague used a variety of methods to manage the woman's episode and to help treat her trauma responses. These were:

1. ***Intlambululo* –** this process involved a ritual cleansing using herbs that assist in calming down one's spirit. These include types of *ubulawu* known as *unozitholana/indlela mhlophe* and *ungcana***.** The patient was bathed using this mixture.
2. ***Ukuthoba***- this process involved the use of herbs that treat anxiety disorders. The term 'ukuthoba' loosely translates to 'the calming'. Tata and his colleague used a herb known as *umwelela,* which is an orange-coloured bud that is traditionally used to treat *umbilini* (anxiety).

3. ***Ukugabha*** – this process involved a purging using a herbal concoction designed to treat headaches associated with panic disorders. Tata and his colleague used a mixture of *unomfixisa*, a green leafy plant that is dried and ground into a powder and then mixed with lukewarm water. The patient was given 2 litres of the mixture to purge with.
4. ***Ukusela-*** this process involved the patient being given a bottled mixture to drink three times a day. The mixture was made using a medicinal plant known as *umbezo*, a smelly brown root that resembles *ubulawu*. Tata explained that this plant is used to treat a sickness known as *amafufunyana*, which translates to 'bad spirits' that attack the patient. Xhosa-speaking people identify panic disorders as both a physical and spiritual manifestation of trauma. The plant also treats insomnia. Tata explained that it was important for the patient to be assisted to sleep since patients who suffer from anxiety disorders usually struggle to sleep.
5. ***Ukufutha-*** this process involved steaming with a mixture of medicinal plants dissolved in water. Tata and his colleague used a mixture of a plant known as *umbaxa* and the African potato. This mixture has a calming effect on the body.

Following this healing regimen, the patient showed signs of improvement as she was able to stay calm and not panic in times of distress. Tata explains that the patient had to be placed on chronic treatment as she suffers a great deal from anxiety disorder, which from Tata's observations is a result of her childhood traumas. As he explains, "umbilini uvuka xa umntu ethe waphazamiseka. Xa ungalungiswana, lombilini uyanyuka ngesifuba wenze umntu aphuluke. Kwafuneka ke enyangiwe ngamayeza okuthoba" *(anxiety is a result of trauma. When the trauma is not treated, the anxiety rises, and a panic attack ensues. When this happens, the person must be treated with medicine to calm the anxiety).*

Hence then, as this case study shows, Tata utilizes a combination of the *Ubuntu* and herbal medicines in his approach to managing trauma-related illnesses in his community. This is a unique approach that was born from the teachings of his ancestors, his family, his community and the natural environment from which he harvests his medicinal plants. In his conceptualization of morality, Tata argues that human beings need to be reminded of ethical ways to behave within the family unit and in the community. When the individual fails to be moral, then the family or community must push that individual to do self-introspection to return to an acceptable level of morality and ethical behaviour. Hence then, according to Tata, *ubuntu* is synonymous with morality. This sentiment aligns with Zigon's (2008) theory that within a particular society there is one predominant morality, and that when people lose their sense of morality it can lead to great distress and that morality must be restored.

Additionally, according to Kleinman (2006), morality is a form of moral consciousness the seat of which is self-embedded in the context of a collective moral sensibility. In his work, he introduces the idea of a 'moral disorder', which he describes as a conflict between the moral life of the individual and our shared moral experience. In other words, individuals follow a moral code or set of values that helps guide them in the art of living and these moral codes are greatly influenced by the culture one comes from. He further adds that individuals following one moral code may encounter others following other moral codes such as those from other cultural backgrounds who subscribe to different worldviews, and this has the potential to challenging what the individual defines as "good" or "bad", and that the definition of good/bad may change depending on different settings of moral experience.

In his review of Kleinman's work, Marashi (2019) confirms that "Kleinman argues that this reality creates uncertainty and danger in our lives and forces us to navigate this conflict through contestations and compromises. How people navigate danger and uncertainty, Kleinman indicates, is telling of what it means to be human and what really matters to us" (Marashi, 2019, p. 1). Therefore, if we understand morality as a shifting phenomenon that is dependent on circumstance, then it makes sense that Tata would suggest a community orientated approach to dealing with issues of morality. In this way, people can learn what it means to live a moral life both as a shared experience and as an individual one**.**

Tata's interpretations of morality raise an important question; What happens when an intruding hegemonic system of morality (which is often contradictory to its purported morality e.g. Christianity) impacts on an indigenous moral system? In the Xhosa-speaking context, the undermining of indigenous ways of knowing brought about by conquest, colonialism and apartheid has been further exacerbated by the forces of modernity, modern education and more especially social media which exposes community members, especially the youth, to diverse ideas on morality. These new ideas can have an impact on how collective consciousness is understood and practiced as indigenous systems are not stuck in stone and can change when influenced by modernity.

In his interpretation of collective consciousness, Tata understands community relationships as being a determinant of health, as the decline in community values can negatively affect wellbeing. The notion of community relationships as a health determinant has been researched within the Xhosa-speaking context. In their work, May & Mji (2024) state that the Xhosa indigenous term for health is 'impilo', which is used to refer to both 'health' and 'life' interchangeably. Therefore, in Xhosa cosmology, *impilo* is regarded as the state of complete balance between relationships. The Xhosa health model stipulates that when these relationships are broken, *impilo* is compromised.

An example of this understanding of *impilo* can be observed when Xhosa-speaking people greet each other. The Xhosa greeting is “Molo, Unjani?”, to which the person being greeted responds “ndiyaphila**,** unjani wena?”. The term “ndiyaphila” means “I have impilo (health)” when translated into English. In this context, to have health means to have balanced relationships. Additionally, *impilo* also refers to natural life because humans depend on nature to survive. Humans depend on clean water, abundance of plant and animal resources and clean air to be healthy. Hence then the term *impilo* also stretches to include the natural environment, and hence then maintaining healthy relationships with nature is part of Xhosa cultural law because it is essential to human life (May & Mji, 2024).

As mentioned in the description of the indigenous Xhosa health model offered by May & Mji (2024), spirituality and the natural environment are important aspects of maintaining good health. Therefore, since the environment plays such a huge role in the definition of health, it has great impact on the health status of indigenous Xhosa-speaking people. This means that stable relationships with the natural environment form part of moral behaviour. It is because of this high reverence for the environment, that natural spaces play a pivotal role in the health management strategies utilized by Xhosa-speaking people. An example of this would be the fact that for an *iGqirha* to qualify as a doctor, he/she must understand how to use natural spaces such as the river, forest and the ocean in maintaining health. I as a trained healer had to undergo various training rituals at these sacred sites (see Case Study 1). To achieve this, the doctor-in-training must conduct training rituals at the river, forest and ocean to qualify as an *iGqirha* or *iTola*. It is common to find indigenous health practitioners performing rituals at the river or at the ocean when managing the health of their patients. This way, moral behaviour as it pertains to the environment is encouraged at both the individual level and collectively.

In his model of how *ubuntu* can be used to heal trauma, Tata suggested the revitalization of the spiritual bonds between human beings and nature as being a key step. This means that Xhosa-speaking people understand morality to go beyond the ethical behaviour human beings exhibit towards each other but also includes the ethical behaviour humans exhibit to the natural environment. Hence then, *ubuntu* as pedagogy includes both human-human interactions, as well as human-environment interactions. Consequently, this suggests that the moral state of relationships (both human and non-human) is a key determent of health. Cunham (2023) argues that this concept forms the very basis of Mpondo theory and hence can be utilized in the contextualization of trauma within the indigenous Xhosa context.

7.2 Conclusion

This chapter as well as chapter 5 presented the study findings in the form of narrative case studies, where data was collected through a series of interviews with key participants. The lived experiences of the participants, including my own, were presented within the context of what they understood to constitute trauma in their lives. As the data shows, participants expressed different understandings of what constitutes trauma, some citing witchcraft and broken kinship relationships as constituting trauma in their lives. This study does not claim to present a universal definition of 'trauma' within the Xhosa cultural context but rather presents the shared interpretations of lived experiences based on the stories that the participants shared.

To reach a much broader universal definition of 'trauma' with in the Xhosa cultural context would require a larger study sample across various Xhosa-speaking communities across South Africa. This study did not achieve that. But rather focused on a small sample of participants from the Peddie region from which the researcher comes from. This sampling technique was chosen since the study took an ethnographic approach to eliciting data within the methods of anthropology at home. To reach a more concise definition of trauma within the Xhosa context, research must be conducted on a much broader scale as there are currently over 7 million Xhosa-speaking people in South Africa. This study does however offer a valuable exploration of these concepts and highlights the significant role that indigenous healing cosmologies play in the maintenance of wellbeing following what participants understood as trauma in their lives. The following chapter summarizes the key critical research outcomes that emerged from this study and examines the ways in which these outcomes can possibly shape future studies that aim to explore the conceptualization of trauma within the Xhosa context from a broader theoretical framework.

CHAPTER 8: Critical research outcomes and conclusions of the study

Camagu

Makubechosi kubehele!!

(Let there be peace and reconciliation!)

8.1 Introduction:

The term *"Camagu"* is used to signify the presence of the ancestors and the divine, often in the context of healing rituals. During ritual, the term is used to acknowledge and honour the ancestors by pleading with them to grant their kin peace and reconciliation. It can also be used outside of ritual context to acknowledge others and as an appeal for the divine to bless them with peace in their lives. Additionally, *Camagu* can be used to ask for forgiveness in instances where an offence had been made. The term cannot be directly translated in a single word. Rather, it is understood through the context in which it is being used (Bell, 2009).

When traditional healers undergo *ukuthwasa,* they are given a spiritual name to mark their transition into spiritual practitioners. This name is referred to as *igama lobugqirha.* This name can be bestowed upon them by their family members, their mentor or by the ancestors. It is believed that one's spiritual name is a representation of the type of work they have been called to do through their calling to become a healer. I received mine from the ancestors in a dream. They named me iNtob'ecamagu (the daughter of peace and reconciliation) because they called me to become a healer that specializes in trauma management. As such a healer, my work involves assisting individuals, families and communities that have experienced trauma to find peace and reconciliation. I achieve this with the use of healing rituals that are aimed at mending broken relationships between the self, family, community, ancestors and the environment to regain wellbeing. I invoke the ancestors to guide the strategies I use in my practice, as well as the patient's process of healing.

In his analysis of Zakes Mda's *The Heart of Redness*, Bell describes the protagonist, named Camagu, as being named as such because his calling was to embark on "a journey of discovery and enlightenment" (Bell, 2009, p. 20). He goes on to add that "Camagu's link to the past of history and myth is construed in the novel in terms of the significance attached to the meaning of his name, his confrontation with the legend of Nongqawuse and the parallel historical narrative" (ibid). Bell argues that the term Camagu,

when used as a name, represents a link to a past of crisis that needs to be reconciled. He bases this assertion on the fact that Zakes Mda drew his inspiration for the novel from Jeff Peires' *The Dead Will Arise*, which offers a historical account of the tragedy of the cattle killing movement and the association between ancestors, ritual and emancipation from the trauma inflicted by colonialism.

Much like Zakes Mda's protagonist Camagu, I too have had to embark on a journey of discovery and enlightenment through learning how to heal my own trauma so that I could be able to heal others. I understand the name Camagu (whether used in its male or female form) to be bestowed upon a person who is a wounded healer. To be named Camagu is to receive a call to resist colonial discourses about the nature of healing the wounds of historical trauma. It is about learning to understand your own wounding in relation to the cosmology of the cultural context you come from. As Bell explains, it is about abandoning "a sense of self that is specified by an imperialist discourse, and, by extension, a neo-colonial one, to embrace a subject position in relation to a counter discourse grounded in the history, traditions and ecology of the land" (Bell, 2009, pg. 21).

It is from this lens that I see parallels between myself and the protagonist Camagu. We both were educated in the United Sates, were called to return home to our ancestral villages to undergo *ukuthwasa* to familiarize ourselves with the landscape as descendants of the Xhosa and Khoi lineages of the Eastern Cape. As such, our initiations into the indigenous spirituality of the region demanded that we be cognisant of the historical trauma that accompanies the landscape where such identities are formed. In the process, we were called to find the heart of redness that lies within us, a space that Canham's Mpondo Theory defines as being both black and indigenous simultaneously. My journey of discovery and enlightenment as Ntomb'ecamagu has culminated into this thesis since it took a primarily autoethnographic approach to eliciting data.

As a journey of discovery, this thesis aimed to identify the indigenous healing cosmologies used in the management of trauma by Xhosa-speaking people by engaging historical trauma theory (HTT) and intergenerational trauma theory (IGT). This was based on the premise that populations historically subjected to long-term, mass trauma such as colonialism, war and genocide exhibit a higher prevalence of disease and mental distress (Braveheart & DeBruyn, 1998). Research shows that Xhosa-speaking people of South Africa have suffered from systemic violence and exploitation under colonial rule, resulting in the loss of their lands, language, cultural identity, and traditional healing practices (Canham, 2023). This trauma has resulted in psychological and emotional consequences on subsequent generations such that the social relationships on which kinship is based have been compromised. The

tethering of these vital kinship bonds negatively affects wellbeing. Academics argue that the psychological and emotional consequences of the initial trauma experience are transmitted inter-generationally with subsequent generations experiencing cumulative and vicarious traumatization through the collective memory of the population (Sotero, 2006).

It is important to note that this study does not aim to make sweeping statements about the entire Xhosa-speaking population of South Africa but rather presents the critical outcomes that emerged from the data of this study. Further studies with a wider study sample would need to be conducted to reach a universal definition of trauma within the Xhosa cultural context. Therefore, the findings presented in this chapter pertain to the interpretations and understandings emerging from the lived experiences of the Xhosa-speaking participants that participated in this study. The research findings are summarised as follows.

8.2 Critical research outcomes

This study found that the Xhosa-speaking people that participated in this study understood trauma to be the result of broken relationships within the self, family, community, ancestors and the environment. This finding is consistent with that of studies conducted by Ohajunwa (2019), Mji (2013), Ohajunwa & Mji (2019) and May (2019). Furthermore, studies such as that of Ward (2023) and Ringland (2019) have shown that spirituality is utilized by indigenous peoples to manage trauma and illness. The term ‘trauma’ does not have a direct translation in the Xhosa language but instead is understood by participants to be the result of compromised relationships within the kinship system of *ukuzalana*.

This understanding of what constitutes trauma emanates from indigenous South African healing practices, which “seek to restore balance and harmony in the individual and the collective, using traditional remedies and rituals that address the physical, emotional, and spiritual aspects of health” (Mawere & Tshamano, 2023, p. 188). Among the Xhosa, spirituality and health are interconnected, hence there is little distinction between the empirical and the sacred. This means that ’trauma’ as a phenomenon is understood to be the result of broken relationships and therefore a breakdown in wellbeing.

Participants expressed their understandings of trauma by linking their spirituality to their wellbeing. The spiritual wisdom of indigenous people as it relates to health knowledge is observed in many cultures around the world. In her study of Indigenous Canadian health knowledge such as Two-Eyed Seeing, Ryff asserts that this link between spirituality and health may “offer new visions for thinking about the interplay of spirituality, well-being, and the natural world” (Ryff, 2021, p. 1). This interplay has proven

to be useful in informing trauma-informed care in countries such as Canada, USA, Australia and New Zealand. In the South African context, some scholars agree that there is still much work to be done in terms of understanding how trauma can affect the physical, emotional, and psychological wellbeing of individuals, their families and communities (Canham, 2023) (Bradbury, 2024).

Xhosa ideas of ill health and trauma constitute the importance of keeping balance in one's relationships, as evidenced by the kinship system of *ukuzalana*. The Xhosa health model describes wellbeing as a state of stable relationships between the self, the family, community, ancestors and the environment. When any of these relationships are compromised, wellbeing is negatively affected (Mji, 2013, 2019; May, 2019, Ohajunwa, 2019). Major historical forces such as land dispossession, migrant labour and the introduction of Christianity have impacted Xhosa-speaking families over the last couple of centuries. Consequently, they have led to a breakdown in relationships not only within kin groups but also between the living and the natural world through which the ancestors manifest their presence.

This study found that the indigenous practices used by participants to manage trauma are deeply rooted in their cultural heritage and spirituality that emphasizes the interconnectedness between individuals, family, ancestors, community and the environment. Furthermore, the use of indigenous healing cosmologies in the management of trauma promotes a sense of empowerment and resilience amongst Xhosa-speaking families and communities. Mawere & Tshamano (2013) claim that this process is particularly important for African populations who draw strength from their cultural systems.

Critical research outcomes 1: Dreams are a source of information

The study revealed that there is a wide array of indigenous healing cosmologies that are utilized within Xhosa-speaking families and communities, of which dreams are one. Dreams are understood to play a role in resolving disputes and thus are methodology for trauma management. Ancestors and water divinities heal pain through the knowledge received from dreams.

Additionally, the process of knowledge generation through *ukuthwasa* includes the use of certain plants and herbs, such as *ubulawu*, that serve to induce a dream state so that the initiate can receive clear succinct messages directly from the ancestral realm. This process has been observed in the traditions of indigenous Canadian people and is referred to as Two-Eyed Seeing. In the Two-Eyed Seeing phenomenon, dreams that are induced for the purpose of ancestral communication are understood to carry knowledge that can be applied for the wellbeing of the dreamer as well as the dreamer's family and community.

In this sense, dreams induced for the purpose of knowledge generation are both an experience and a narrative report that contains important information regarding the health and wellbeing of the community. This process includes a first-hand account of the dream experience, as the dreamer gets to share his/her dream first-hand with those who are listening as part of the knowledge validation process. In the Canadian context, the knowledge generated from the Two-Eyed Seeing process is used to heal the effects of historical and intergenerational trauma that is prevalent in many indigenous families and communities, thereby serving to strengthen the group's resilience. The Xhosa-speaking participants in this study expressed a similar understanding of the use of dreams in the management of wellbeing through the *ukuthwasa* process and the cultural strategy of *ukulawula amathongo.*

Critical research outcome 2: The ancestors play a key role in addressing conflict through ritual and maintenance of kinship relationships

This study found that Xhosa-speaking people understand the breakdown of kinship relationships to be a traumatic experience that can lead to intergenerational trauma. This is because amongst Xhosa-speaking people, health is understood to be a state of balanced relationships between the self, family, community, ancestors and environment. When these relationships break down, health and wellbeing are compromised. The ancestors play a key role in mending these broken relationships to maintain health and wellbeing. Ancestral convocation through ritual is one of the key strategies that are utilized to manage trauma amongst Xhosa-speaking people.

Participants discussed ways in which dreams can assist in resolving disputes to bring about reconciliation. The participant who is referred to as Mpondo, expressed how in his life dreams have allowed him to access knowledge from the ancestral realm that he has subsequently used in the process of fostering reconciliation within his own family unit and in the wider community that he serves as a traditional healer. For the participant, dreams are not only spiritual experiences but are also deeply rooted and as a result can have applications for healing conflict, pain and trauma.

Ward (2024) agrees with this notion by stating that "indigenous dreaming and spirituality brings healing, greater resilience, and has the power to heal trauma" (Ward 2024, pg. 1). Additionally, he argues that for indigenous people, the ability to connect with a wide range of spirit areas such as the dream world (also known as 'dream time'), grants a unique link to ways of accessing knowledge, thinking of solutions to a difficult topic and understanding other people. Mudrooroo (1995) argues that amongst the indigenous people of Australia, 'dream time' marks a sacred psychic state during which

contact is made with the Divine Law in order to download information from one's ancestors in the form of teachings that are sacred in origin**.** Therefore, the study findings of this thesis align with the works conducted by Ward (2024) and Mudrooroo (1995).

Critical research outcome 3: Witchcraft accusations can lead to trauma and gender-based violence

This study found that Xhosa-speaking people regard the concept of witchcraft to be a cause of trauma within their families and communities. Various strategies, such as consultation with a diviner are used to neutralize threats caused by witchcraft. If these threats are not neutralized, then relationships become compromised, leading to trauma within the family unit and/or community. Witchcraft accusations are the result of unstable power dynamics that are caused by disturbances in family relationships. The stability of families is understood to be crucial to the alleviation of violence and trauma. However, those that are falsely accused are subjected to abuse and violence, most of whom are women, showcasing the vulnerability of women to traumatic situations.

Witchcraft accusations typically emerge in close relationships under strain often due to an unequal allocation of desirable resources that lead to jealousy. These desirable resources are not only based on material wealth and good fortune but also on favoured relationships (e.g. in polygamous marriages), where one individual may receive more attention and affection than others. This individual may feel an equal if not greater right to share in it and who begrudge the discrepancy. The believed impacts of this jealousy, and sometimes guilt (a witch accuser may be guilty of witchcraft), is the accusation that the misfortune and ill health of a close family member is caused by that of another. The impact of colonialism, apartheid, modernity and capitalism has exacerbated this phenomenon and led to cumulative trauma through the introduction of migrant labour policies, breakdown in family structures, decline of indigenous spirituality and disruption of traditional gender roles.

Critical research outcome 4: Ubuntu and spirituality can be used as tools for managing wellbeing

This study found that some participants regard *Ubuntu* as a methodology for managing wellbeing through the adoption of the Xhosa indigenous health model that places emphasis on collective approaches to gathering knowledge. In the Xhosa cultural context, *Ubuntu* is understood to be a methodology for maintaining health by emphasizing the notion that 'umuntu ngumuntu ngabantu**'** (a person is a person through other people), thereby emphasizing that collective consciousness is a tool for lifting the burden of disease. Participants in the study revealed that societal issues such as family violence and kinship conflicts have resulted from the loss of *Ubuntu* in the family unit and at the

community level. This loss of *Ubuntu* has resulted in the decreased value for human life, which further exacerbate the challenges faced by the community. Participants understood moral regeneration to teach communities to strive for collective health within the context of collective consciousness.

Critical research outcome 5: Xhosa trauma management strategies are based on the indigenous health model

The following section of this chapter presents the interpretations of the Xhosa indigenous health model as understood by the participants. In this health model, wellbeing is regarded as a state of stable relationships. For a person *(umuntu)* to be healthy, he/she must have a stable relationship with the self, the family unit one comes from, the community one lives in, the ancestors one is descended from and the natural environment in which one exists. When these relationships are broken, then wellbeing is compromised.

Following this health model, participants expressed strategies that they utilized in their respective situations in the process of managing what they understood to be trauma in the lives. It is important to note that these strategies emerged from the lived experiences of the Xhosa-speaking people that participated in this study and do not represent the strategies which might be used by the entire Xhosa population of South Africa. Therefore, these strategies emerged from the research data and materialize from the participants' own interpretations of Xhosa healing cosmologies. These strategies include:

1. ***Intlambululo & ukuthoba*** – this process refers to ritual cleansing using herbs that assist in calming down one's spirit after a traumatic event has occurred**.** This process also involves the use of herbs that treat anxiety disorders. The term 'ukuthoba' loosely translates to 'the calming'. Examples used by participants include *ubulawu.*
2. ***Ukufutha-*** this process refers to ritual steaming with a mixture of medicinal plants dissolved in clean water that induce a calming effect on the body. Examples used by participants include *umwelela.*
3. ***Ukugabha*** – this process refers to ritual purging using herbal concoctions designed to treat headaches associated with panic disorders which may be a symptom of trauma-related illness. Examples used by participants include *unomfinxiza.*
4. ***Ukusela-*** this process refers to the patient being given a bottled mixture to drink three times a day. The mixture is made using a medicinal plant that treats insomnia that is caused by trauma-related events**.** Examples used by participants include *umbezo.*

5. ***Ukusila*** – the brewing of traditional beer (umqombothi). This process involves gathering as a family and community to brew beer that will be used to make an offering to the ancestors. The beer can be offered at the family shrine or at sacred sites such as the river, the forest or the ocean.
6. ***Ukurhuma ezinkundleni –*** the making of offerings at the sacred sites such the river, forest or ocean. Offerings can include beads *(intsimbi)*, seeds *(imbewu)* and tobacco *(icuba)* as well as beer *(umqombothi).*
7. ***Ibhunga –*** this process refers to a family group therapy session where all of the issues that cause conflict in the family/community are discussed. Each participating member is given an opportunity to air their grievances. This process allows for people to speak openly about what and who in the family/community is troubling them so that forgiveness can be promoted. Those who had been the subject of a grievance are given the opportunity to apologize and to make amends with those they have offended. This step is a key element in the peace-making and reconciliation process. Tea and coffee are served after the completion of the therapy session.
8. ***Intlombe-*** the ritual dance ceremony. This process requires the participation of the family/community members who wish to join for the healing ritual. The *intlombe* includes the singing of traditional songs and the beating of the drum to invoke the spirits of the ancestors so that they can join in the reconciliation process**.**
9. ***Amahlaza –*** this process refers to the concluding family/community meeting where members share their opinions about how the ritual process went and how things can be improved for future healing rituals**.** The *amahlaza* process acts as a review session.
10. ***Dream incubation (ukulawula amathongo)-*** Dream incubation offers a plethora of benefits for personal development and problem-solving. By tapping into the subconscious mind, individuals can gain insights, creative solutions, and emotional healing**.** Through dreams, individuals may confront their fears, unresolved emotional issues, or past traumas, and find healing and resolution. Dream-sharing and interpretation follows a dream has been incubated.

These key areas emerged from the study findings as being of importance to the participants and their families in times of crisis. Although there is variation in how these strategies were applied, however, participants expressed similar understandings in terms of the importance of heling cosmologies in the management of what they understood to constitute trauma in their lives.

It is also important to note that participants varied in their interpretations of what constituted trauma, as evidenced by the differences in the stories they offered to share. Since I as the researcher allowed the

participants to share the stories that were the most impactful to them in their lives, this approach allowed for the participants to express their own interpretations and understandings of what constitutes trauma. A key emerging theme in all the stories was the breakdown of kin relationships as being a source of trauma. These breakdowns had various sources depending on the participant's own unique life story, emphasizing the diversity of life experiences within the study group. It is this diversity of life experience that make it challenging to settle on one definition of trauma within the study group.

Critical research outcome 6: The relationship with nature is a key determinant of health

This study found that participants utilize the natural environment in various ways in their attempts to manage their trauma. Participants expressed how in times of crisis, visits to sacred sites such as rivers, forests and oceans were made during the process of conducting healing rituals, thereby revealing the intrinsic connection that participants have to their natural environments. It is important to note that these sacred spaces in the environment also help to strengthen the bonds the participants share with their ancestral spirits who reside in the natural environment.

The case of the Shell seismic survey on the Wild Coast showcases how Xhosa-speaking people hold much reverence to the natural environment and how disturbances in the environment are understood to negatively affect wellbeing. Maintaining the sanctity of these spaces is a collective moral effort as water divinities are believed to influence the wellbeing of entire communities. Hence, the protection of natural water sources is viewed as crucial. The emphasis on shared morality is based on the importance of maintaining the integrity of, and access to, the natural world through which one can connect to the ancestral world. Much of which has been disrupted by the forces that have led to historical trauma and are still threatening it by neo-colonial, corporate and global economic forces.

The following sections summarise the conclusions drawn from the study findings discussed in section 8.3.

8.4 Concluding remarks

Participants shared how in their own lives healing cosmologies played a key role in fostering healing. That does not mean that the participants do not continue to experience pain in their lives. Hence, the participants do not consider these healing cosmologies as being a definite guarantee to eradicating suffering. Rather, the value of these cosmologies lies in the attempt to re-unite the community (both

living and dead) through ritual action that may offer some respite to the traumatic pain experienced. The conclusions drawn from this study are summarised as follows.

Spirituality can be used as a strategy to manage trauma

Participants in this study revealed that they use spirituality, dreaming and rituals to manage trauma. While spiritual knowledge in Xhosa communities is a methodology for understanding obtaining balanced relationships, there are also significant barriers to resolving historical and intergenerational trauma due to the magnitude of social disruption that has occurred. This disruption includes the impact of suspicion and mistrust on communities regarding misuse of traditional healing modalities, especially as they have been demonized by the dominant Christian faith.

Indigenous healing cosmologies play a key role in the management of historical and intergenerational trauma

This study concludes that the participants in this study utilize indigenous healing cosmologies, such as dreaming, ancestral communication and ritual to understand and manage trauma-related issues. These strategies are informed by Xhosa indigenous cosmology, which serves to make cultural sense of the cause of illness and the appropriate health seeking behaviour.

Using indigenous healing cosmologies, participants were able to address the effects of historical and intergenerational trauma within their families and communities in order to promote healing and reconciliation. They achieved this by utilising various strategies including dreaming and spirituality to regain the balance of relationships that have been undermined by conflict. This approach is based on the indigenous Xhosa health model that defines health as a state of balanced relationships between the self, family, community, ancestors, and the environment.

In the Xhosa context, dreams are used to connect to the ancestors from which the kin are descended. The ancestors act as guides that provide wisdom, guidance and protection when called upon. In times of crisis, the ancestors are invoked using dreams and ritual. It is through dreams that the ancestors then communicate their guidance to the living kin, often offering guidance on the type of ritual that should be performed to bring about wellbeing. Participants revealed the plethora of ways in which issues of conflict have been addressed in their kin groups using dreams and ritual. The type of ritual used depends on the issue being addressed, for example, issues of conflict within the kin group are addressed through visitations to sacred sites where offerings to the ancestors are made, through the offering of a

sacrificial animal in the family shrine, through consultation with diviners and through the preparation and drinking of traditional beer. Spiritual knowledge plays a pivotal role in the maintenance of healthy relationships within families and communities, thereby promoting reconciliation and wellbeing.

Participants utilized the spiritual knowledge of traditional healers as a means of support through divinations and guidance during rituals. Participants sought the guidance of traditional healers during times of conflict and crisis within the families and kin groups. This finding is consistent with that of Hirst (2009) who found that Xhosa-speaking people consult with traditional healers in time of crisis as a means of receiving guidance and knowledge on how to manage the crisis to bring about stability and resolution. Thus, this study concludes that indigenous healers play a key role in the management of crisis within the communities they serve. They achieve this by working as individuals in their individual practices, and collectively according to the gifts they have been given by the ancestors.

Mending broken relationships is a strategy for healing trauma

This study concludes that breakdowns in kin relations can sometimes lead to conflict and violence as was observed in the lived experienced of the study participants. In such times, indigenous healing cosmologies such as rituals play a significant role in the resolution of such conflicts and in the management of the trauma emanating from the violence. There are multiple ways in which ritual is applied to aid in the mending of relationships that have been undermined by conflict. These include visiting sacred sites, ancestral convocation and offering of animal sacrifices such as goats. The use of cultural systems for conflict resolution holds the potential to ease conflict and champion for the rectification of broken families and communities. The *ukuzalana* system fosters the bringing together of families and celebrating shared ancestral relationships with extended family members and communities.

Consequently, indigenous Xhosa healing cosmologies offer a rich tapestry for conflict resolution mechanisms that effectively tackle issues of family and community violence. These include mediation with the ancestors through divination, negotiation within the affected members, and reconciliation between the ancestors and their living kin. This is of paramount significance, especially considering the lasting effects of colonization and apartheid which have had enduring remnants such as poverty, unemployment, and economic marginalization which continuously fuel violence.

Ubuntu as a system of morality aids in reconciliation

This study found that when issues arise within families, the family is supported through the collective consciousness of the community, thus placing *ubuntu* at the centre of the reconciliation process. Some participants expressed that moral regeneration is needed to manage trauma in the communities that have experienced compromised connections to indigenous cosmologies.

As discussed in Chapter 6, morality refers to shared understandings of ethics and ethical behaviour. In the indigenous Xhosa context, moral regeneration includes revitalization of ancestral knowledge systems that aid in the administration of ethical behaviour. The study found that some participants consider *Ubuntu* as an indigenous strategy that can be utilized in certain ways to bring healing. Some of these ways include protecting sacred spaces such as rivers, forests and the sea.

Some participants understood *Ubuntu* to be a system of morality that offers guidelines on ethical behaviour. When it is compromised, the ethical foundations of the community are also compromised. In that case, remedial steps need to be taken to restore the imbalance. To achieve this, moral regeneration is needed to revitalize the spirit of unity and reconciliation within the community. However, there are significant barriers to resolving historical and intergenerational trauma within Xhosa-speaking communities due to the magnitude of social disruption that has occurred and the impact these disruptions have had on indigenous healing modalities.

Encouraging the use of indigenous healing practices to manage trauma

This study concludes that there is a need to encourage the use of indigenous healing practices for the purpose of managing trauma in South Africa. Participants in the study showed the various ways in which indigenous knowledge and spirituality assisted them, their families and their communities during times of crisis. The methods that were used were deeply grounded in identity and ancestral knowledge as forms of resilience in the face of uncertainty.

Ohajunwa (2019) asserts that in academic explorations of the cultural use of spirituality in maintaining health and wellbeing, it is important to consider the ways in which indigenous communities build resilience. She further cautions against the individualisation of resilience because in many indigenous communities, the building of resilience is a collective effort. She mentions how amongst the amaBomvana people who themselves are a Xhosa-speaking group, spirituality is deeply embedded in notions of identity and therefore is used in the formation of resilience. She asserts that amongst Xhosa-

speaking people, spirituality and indigenous cosmology play a key role in the formation of identity and therefore play a key role in building resilience.

This notion has been corroborated by studies conducted on the use of spirituality among the Venda people of South Africa. Muwere & Tshimano (2023) acknowledge that among the Venda, identity and indigenous knowledge are important factors in the strengthening of resilience and restorative justice. The authors encourage the use of indigenous healing practices as a means of managing historical and intergenerational trauma. The idea is that if people who have been subjugated through colonialism and oppression can be assisted to rebuild a strong sense of self-worth, then they can be assisted to reembrace the parts of their identity that were oppressed. Thereby allowing for the building of resilience.

Research in Canada has shown the effectiveness of this approach. The Two-Eyed Seeing approach has been used to assist indigenous Canadians to managing the health challenges stemming from historical and intergenerational trauma. Connors (2024) asserts that communities that support and maintain indigenous healing cosmologies, cultural practices, beliefs and self-determination cope more effectively with traumatic experiences.

Moving forward with indigenous knowledge for healing historical trauma

This thesis argues that there is need to study the cultural understandings of what constitutes trauma within the indigenous context in South Africa. To emphasize the importance of this notion, I will share a dream I had at the end of my PhD journey as I was preparing to submit this thesis. On this day, I had made a prayer to the ancestors in gratitude for their support and guidance throughout the research process. As in custom, I made an offering of coins, beads and seeds at the river and asked for a way forward. That night, I received a dream.

In the dream, I saw myself visiting a school and upon my arrival I was met by a mother and her teenage daughter. The pair were in distress as the daughter was carrying what seemed to be a dead infant in her arms. The mother asked me to please help her revive the child. Their clothes were wet and she explained that she tried to make a plea to the ancestors in the river but the child would not heal from the ailment. I felt saddened by the news and told her that I did not know what I could do. The pair walked towards the classrooms and I followed behind to see where they were going. As we entered the classroom block, I saw the young students smoking drugs, fighting violently with dangerous weapons and generally being unruly. As we walked up the stairs to the top classroom block, the daughter entered a room where it seemed she had been sleeping. In the classroom were other young female students who

also had babies in their arms. The mother joined other adults in the foyer and the group wept heavily together. As I looked at the status of the condition the female students were in in the classroom, I saw dirty diapers on the floor and empty alcohol bottles. Some of the students appeared intoxicated. There were no teachers in sight.

I woke up from the dream feeling very anxious. As part of the *ukulawula amathongo* process, I shared the dream with my supervisor who advised me to speak to my mentor about the dream to find out what it meant. My mentor, who is an indigenous elder in the community, shared his understanding of the dream. In his interpretation, the dream symbolized the current state of society in South Africa. He shared that in many parts of the country, the decline in *ubuntu* has resulted in major health issues for the youth of our country, particularly in terms of substance abuse, violence and teen pregnancy, which all contribute to disruption in education. We spoke in depth about how unresolved trauma can be passed down to subsequent generations, resulting in major health issues amongst the youth. This conversation resonated deeply with the sentiments of moral regeneration as being key to the breaking of cycles of trauma.

Indigenous South African cosmology encourages the building of healthy homes whereby children are allowed to grow up in healthy environments both physically and psychologically. When children are denied this, their development becomes distorted, and their wellbeing becomes compromised consequently. At the launch of the Nelson Mandela Children's Fund in 1995, Mandela gave a heartwarming speech in which he said, "there can be no keener revelation of a society's soul than the way in which it treats its children". He went on to add that "we come from a past in which the lives of our children were assaulted and devastated in countless ways. It would be no exaggeration to speak of a national abuse of a generation by a society which it should have been able to trust. As we set about building a new South Africa, one of our highest priorities must therefore be our children. The vision of a new society that guides us should already be manifest in the steps we take to address the wrong done to our youth and to prepare for their future. Our actions and policies, and the institutions we create, should be eloquent with care, respect and love" (Mandela, 1995). With this speech, Mandela was reminding South Africa of its moral obligation to ensure a safe environment for the country's children in the reconciliation process.

According to research, children in South Africa experience some form of violence before they turn 18 years old (Malatjie & Mamokhere, 2024). This statistic reveals the failure of the South African state in protecting young people, and the failure of systems of morality in the country. I make the assertion that

for healing to happen in South Africa, *ubuntu* needs to be regenerated and re-embraced in the country. The Xhosa indigenous health model places an emphasis on collective consciousness as part of the healing process. Without healthy relationships there can be no healthy communities. If we are to build healthy families and subsequently a healthy nation, then we need to value the building of stable relationships as a means of fostering wellbeing. The principles of *Ubuntu* teach that collective trauma requires the use of collective consciousness to lift the burden of disease. It also requires the political commitment to address the underlying social and economic realities facing the nation.

Closing the study

This study was exploratory in its design as it aimed to explore the cultural uses of indigenous healing cosmologies in the management of historical and intergenerational trauma amongst the Xhosa-speaking people of South Africa. It emphasized the importance of personal experience in providing healing for those whose lives have been affected by the impact of historical trauma. Indigenous healing cosmologies, such as dreams, offer important insight into how responses to traumatic experience lead to ritual intervention that has the potential to provide some form of relief for the inflicted.

The application of indigenous methodologies in trauma management has the potential to play a transformative role in the health modalities of South Africa. Emotional, spiritual, psychological, and collective helplessness remain universal features of the lives of indigenous people globally. The Xhosa indigenous health model which encourages the use of an Ubuntu-centred approach to managing pain has the potential to contribute towards the restoration of harmony within the country. According to the study participants, *Ubuntu* can act as a process of managing wellbeing by restoring compromised relationships and thereby promoting healing and reconciliation. In a country like South Africa that is still reeling from the historical trauma of colonialism and apartheid, the adoption of the indigenous Xhosa health model in trauma-informed care has the potential to aid in promoting healing.

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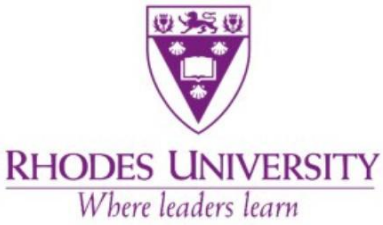
APPENDIX

(i) Ethical clearance



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https://www.ru.ac.za/researchgateway/ethics/

9 November 2023

Miss Thandokazi May

Email: g21m7285@campus.ru.ac.za

Review Reference: 2023-5208-8184

Dear Miss Thandokazi May

Re: Human ethics renewal application: Exploring the Cultural Use of Indigenous Healing Cosmologies in the Management of Historical and Intergenerational Trauma Amongst the Xhosa-speaking People of South Africa

Researcher: Miss Thandokazi May

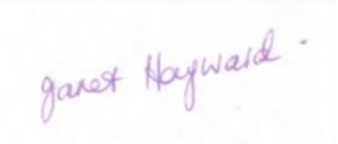
Supervisors: Doctor Michelle Cocks,

This letter confirms that the above Annual Report has been reviewed and **APPROVED** by the Rhodes University Human Research Ethics Committee (RU-
HREC). Your Approval number is: 2023-5208-8184

Approval has been granted for 1 year. An annual progress report will be required in order to renew approval for an additional period.

Please ensure that the Human Research Ethics Committee is notified should any substantive change(s) be made, for whatever reason, during the research process. This includes changes in investigators. Please also ensure that a brief report is submitted to the ethics committee on the completion of the research. The purpose of this report is to indicate whether the research was conducted successfully, if any aspects could not be completed, or if any problems arose that the Human Research Ethics Committee should be aware of. If a thesis or dissertation arising from this research is submitted to the library's electronic theses and dissertations (ETD) repository, please notify the committee of the date of submission and/or any reference or cataloguing number allocated.

Sincerely,

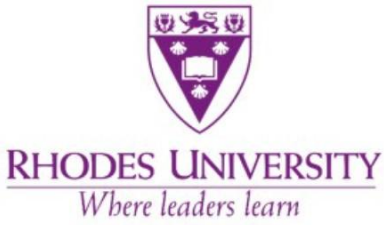


Dr Janet Hayward

Chair: Rhodes University Human Research Ethics Committee, RU-HREC

cc: Ethics Coordinator

(ii) Consent form -isiXhosa



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Ifomu yesivumelwano somthathi-nxaxheba

Uyamenywa ukuba uthathe inxaxheba kuphando-nzulu olunesihloko esithi:
Ukuhlolisiswa kokusetyenziswa kwamanye amayeza endalo nendalo iphela ekulawuleni isenzeko sentlungu yembali neyeminyaka ehambelana phakathi kwabantu abathetha isiXhosa eMzantsi Afrika.

Umphandi:
Thandokazi May

Abaphathi:
Dr. Dominique Santos, Dr. Michelle Cocks, Dr. Penelope Bernard

Injongo kunye neNenjongo zoPhando:

Eyona njongo yolu phando kukuqonda iindlela zokuchaza iintlungu ezibangelwe yimbali (Historica l Trauma) nezo zidluliselwa kwizizukulwana ngezizukulwana (Intergenerational Trauma) ngaphaka thi kwenkcubeko yabantu abathetha isiXhosa. Injongo yesibini kukuqonda indlela abantu abathetha isiXhosa abasebenzisa ngayo iindlela zokunyanga zesintu ukuze bajongane nezo ntlungu, kokubini kwiintsapho zabo nakwizinga loluntu.

Iinjongo zophando zezi zilandelayo:

- Zeziphi iindlela zokuchaza "iintlungu" ngokwesiko phakathi kwabantu abathetha isiXhosa?
- Zeziphi izicwangciso abazisebenzisayo abantu abathetha isiXhosa ukujongana neentlungu ekha ya nasebantwini?

Inkqubo:

Umphengululi uza kuncokola nawe. Kule ngxoxo, uza kucelwa ukuba uxelele ngesiganeko esibalul ekileyo ebomini bakho osibona njengesibuhlungu. Ukhululekile ukuxela nasiphi na isiganeko osinq wenelayo. Uyakwazi nokuzikhusela ukuba ungafuni ukuxela iziganeko ezikwenza ungakhululeki.

Ixhaswa yi:

Olu phando luxhaswa yiNational Institute for Humanities and Social Sciences (NIHSS) neRhodes African Studies Center (RASC). Akukho ngxabano yomdla eyaziwayo kwicala labaphengululi oka nye abaxhasi.

Iingozi ezinokwenzeka:

Akukho bungozi bukwaziwayo okanye obulindelekileyo kuwe ngokuthatha inxaxheba kolu phando

. Ukuba uvakalelwa kukuba akukhululekanga ukuxela into ngexesha lengxoxo, nceda ukhethe ukuy eka.

Intlawulo:

Akuyi kuhlawulwa ngokuthatha inxaxheba kolu phando.

Ukugcinwa kweMfihlo:

Ukuze ugcinwe imfihlo, igama lakho aliyi kubekwa kuphando. Endaweni yoko, xa kuthethwa ngamazwi akho, kuza kusetyenziswa igama elingesilo elakho.
Ukuba kuza kubhalwa iingcaphulo ezichanekileyo kwiincwadi ezipapashiweyo, siya kwenza oko ngendlela eya kususwa kuyo yonke into engachongi wena.

Ukugcinwa kwedatha:

Abaphengululi baza kusebenzisa incwadana yophando ukubhala igalelo lakho. Idatha iya kugcinwa ubuncinane iminyaka emi-5 emva kokuba uphando lugqityiwe. Emva kwale minyaka emi-5, idatha iya kutshatyalaliswa.

Ilungelo Lokurhoxisa:

Ukuthatha inxaxheba kwakho kolu phando kusuka ekuthandeni kwakho. Unokurhoxisa kwiprojekthi yophando nangasiphi na isizathu, ngaphandle kwengcaciso okanye isohlwayo.

Ukulandelela:

Emva kokuba idatha ihloliwe, umphengululi uza kuyifundela kuwe ukuze ukwazi ukuyitshintsha ukuba unqwenela. Lulwazi oluvumayo kuphela oluya kubaliswa.

Imibuzo okanye Inkxalabo:

Nceda uqhagamshelane noThandokazi May (thandokazimay8@gmail.com) okanye uGqr. Dominique Santos (d.santos@ru.ac.za) ukuba unemibuzo okanye inkxalabo eyongezelelweyo.
Olu phando luvunyiwe ngokwesimilo yiRhodes University Human Research Ethics Committee.
Nayo nayiphi na imibuzo ephathelele amalungelo akho njengomthathi-nxaxheba inokuthunyelwa kule komiti ngokusebenzisa i-Ethics Office ku-ethics-committee@ru.ac.za

Isivumelwano esisayiniweyo:

Ukusayinwa kwakho apha ngezantsi kubonisa ukuba uyifundile kwaye uyayiqonda inkcazo enikiwey o.
Ndinikwe ithuba lokubuza imibuzo kwaye imibuzo yam iphendulwe. Ndiyavuma ukuthatha inxaxhe ba kwiprojekthi yophando. Ikopi yale fomu yesivumelwano iya kunikwa nam

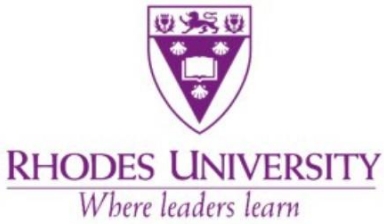
Igama lomthathi-nxaxheba		*Usuku*
Utyikityo	*Usuku*	

Utyikityo lomphengululi

Ndifundele kwaye ndacacisela lo mthathi-nxaxheba ifomu yesivumelwano ngaphambi kokufumana imvume yakhe, kwaye umthathi-nxaxheba wayenolwazi ngeziqulatho zayo waza wabonakala eyiqonda.

Igama lomphengululi	*Utyikityo*	*Usuku*

(iii) Consent form- English



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https://www.ru.ac.za/researchgateway/ethics/

Participant Consent Form

You are invited to participate in a research study entitled: Exploring the cultural uses of indigenous healing cosmologies in the management of historical and intergenerational trauma amongst the Xhosa-speaking people of South Africa

Researcher:
Thandokazi May

Supervisors:
Dr. Dominique Santos, Dr. Michelle Cocks, Dr. Penelope Bernard

Purpose and Objective of the Research:

The primary aim of this study is to identify the indigenous understandings of historical trauma (HT) and intergenerational trauma (IGT) within the cultural framework of Xhosa-speaking. The secondary aim is to identify how Xhosa-speaking pepole utilize indigenous Xhosa healing cosmologies in the management of such traumas both within their Xhosa-speaking family units and at the community level.

The study objectives are as follows:

- What are the indigenous understandings of "trauma" amongst the indigenous Xhosa-speaking people?
- What strategies do Xhosa-speaking people use to manage trauma within their homes and communities?

Procedures:

The researcher will engage with you in a discussion. In this discussion, you will be asked to share a significant life event that you considered as traumatic. You are free to share whatever event you wish. You are also free to not share any events that make you feel uncomfortable.

Funded by:

Funding for this research is provided by the National Institute for Humanities and Social Sciences (NIHSS) and the Rhodes African Studies Center (RASC). There is no known conflict of interest on the part of the researchers or sponsor.

Potential Risks:

There are no known or anticipated risks to you by participating in this research. If you feel uncomfortable sharing something during the discussion, please choose not to.

Compensation:

You will not be compensated for participating in this research.

Confidentiality:

To protect confidentiality, your name will not be featured in the research. Instead, in cases where your words are quoted, a pseodonym will be used.

If direct quotations will be reported in any publications, we will do so in a way that identifying information about you is removed.

Storage of Data:

- The researchers will use a research journal to documents your input.
- Data will be stored for at least 5 years after the study is complete. Once the data is no lon ger required following those 5 years, the data will be destroyed.

Right to Withdraw:

Your participation in this study is voluntary. You may withdraw from the research project for any reason, without explanation or penalty.

Follow up:

Once the data has been analyzed, the researcher will read the data to you so as to allow you the opp ortunity to change details if you wish. Only information you consent to will be shared in the telling of yuur story.

Questions or Concerns:

Please contact Thandokazi May (thandokazimay8@gmail.com) or Dr. Dominique Santos (d.santos@ru.ac.za) if you have further questions or concerns.

This research project has been approved on ethical grounds by the Rhodes University Human Research Ethics Committee. Any questions regarding your rights as a participant may be addressed to that committee through the Ethics Office at ethics-committee@ru.ac.za

Signed Consent:

Your signature below indicates that you have read and understand the description provided.

I have had an opportunity to ask questions and my questions have been answered. I consent to participate in the research project. A copy of this consent form will be shared with me.

Name of Participant	*Signature*	*Date*

Researcher's Signature	*Date*

I read and explained this consent form to the participant before receiving the participant's consent, and the participant had knowledge of its contents and appeared to understand it.

Name of Participant	*Researcher's Signatur e*	*Date*