

**THE DEVELOPMENT OF A PHOTO THERAPY TOOL  
FOR EDUCATIONAL PSYCHOLOGISTS WITHIN THE  
SOUTH AFRICAN CONTEXT**

by

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**DOCTOR OF EDUCATION**

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**DECLARATION**

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I hereby certify that the English language of the following thesis meets the requirements of academic publishing. This thesis was linguistically edited and proofread by me, Dr. L. Hoffman.

**Title of thesis**

**THE DEVELOPMENT OF A PHOTO THERAPY TOOL FOR EDUCATIONAL  
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## **ABSTRACT**

The study reports on the development of a photo therapy tool for educational psychologists within the South African context. A literature study explores the nature, advantages, characteristics and the application of photo therapy with clients in a therapeutic setting. The developmental intervention research design guided the practical development of an electronic photo therapy tool that can be applied by educational psychologists in a therapy setting with clients. The empirical research is qualitative in nature, as the effectiveness of the newly developed photo therapy tool is evaluated by emerging adults and educational psychologists as an intervention strategy.

In order to accomplish this purpose, emerging adults, as well as educational psychologists shared their perceptions of the newly developed photo therapy tool. Thus the usefulness of the photo therapy tool was investigated as an intervention approach. Qualitative data generation techniques, focus group interviews and photographs were utilised.

The research results show that the newly developed electronic photo therapy tool has the potential, as a modern therapeutic tool, to be used by educational psychologists as an intervention strategy. The developmental intervention research design is a continuous process, and as the life world is forever changing, improvements to the photo therapy tool can always be added according to new suggestions and ideas.

The findings allow theorisation about the significance of the photo therapy tool. The study further determines that there is definite potential in the electronically created photo therapy tool, as both the young adults and the educational psychologists perceived the photo therapy tool as a possible and valuable tool in the therapeutic intervention process.

**Keywords: Photo therapy, young adults, emerging adulthood, psychotherapy, expressive therapy, educational psychologists, therapeutic tool, multicultural**

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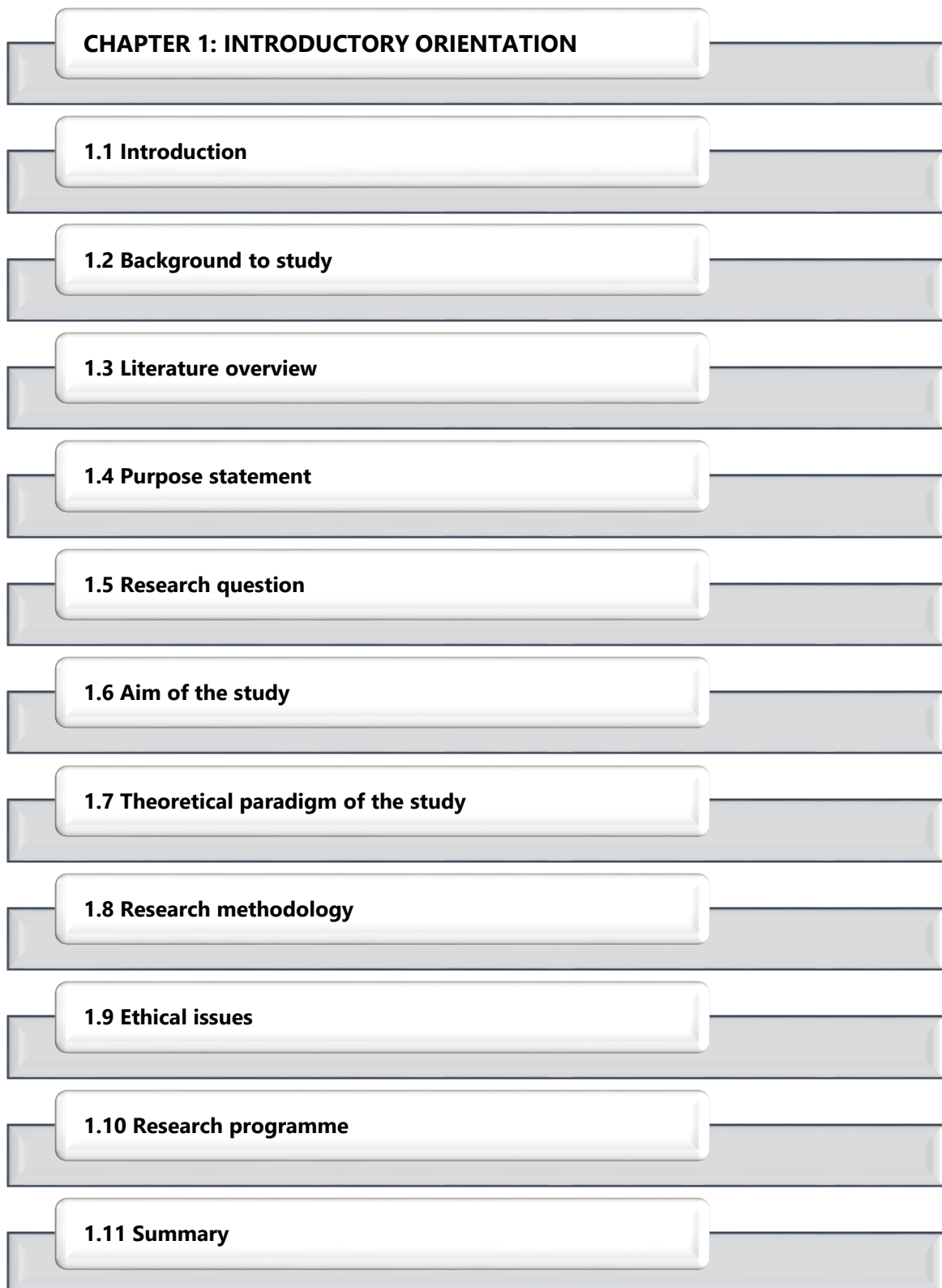
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**Diagram 1.1: Overview of Chapter 1**

## CHAPTER 1: INTRODUCTORY ORIENTATION

*My kiekies is verwysings  
my lewensinventaris  
die ensiklopedie van my bestaan  
My kiekies is bewyse  
vir die feit dat ek ook daar was  
'n prentjekommentaar wat my beaam*

*Daar is komedie in my kiekies  
'n skaterlag, betraan  
deur die afstand tussen destyds en vanaand  
Daar is ritme in my kiekies  
'n patroon wat hom herhaal  
in die kom en gaan en wegbly van gesigte...  
(Lucas Maree)*

*My pics are references  
my life inventory  
it is the encyclopedia of my existence  
My pics are evidence of the fact that I existed  
a picture commentary that endorses me*

*There is comedy in my pics  
a laughter, a tear  
by the distance between then and tonight  
There is rhythm in my pics  
a pattern that repeats itself  
in the coming and going away from faces ...  
(translation: Lucas Maree)*

## **1.1 Introduction**

The intention of this chapter is to provide an overview of the study. The nucleus of my study is the design and development of a photo therapy tool for the South African therapy environment. The study contributes to an understanding of photo therapy within a South African therapeutic context for psychologists. This serves to enhance the discourse in photo therapy as a valuable tool in therapy. The purpose statement and the research questions are stated in this chapter. Furthermore, the contextualising of the study is enhanced by the background of the study, as well as the research methodology as discussed. The theoretical framework of the study and the psychological constructivism are postulated as the main paradigm framework of the study. The research method is conveyed and the ethical considerations embedded in the research are discussed. The key concepts are defined, thus providing a synopsis of the study.

## **1.2 Background of the study**

In South Africa, the new Mental Health Care Act (17 of 2002) was promulgated in 2002. Janse van Rensburg (2007:205) positions that the focus of the act is on the care, rehabilitation and treatment of mentally ill persons. The act mainly focuses on the human rights of mentally ill persons to improve services and to focus on community care. This highlights the importance of care for mental health patients within South Africa with its diverse society, where the need for addressing mental health matters is of great significance. The World Health Organisation (2013) emphasises in its Mental Health Action Plan (2013-2020) that mental health care is not adequately addressed by most countries. It further confirms in the Mental Health Atlas (2011) that resources are inadequate and in lower-income countries less than 25 cent per person is annually being spent on mental health matters. Lund, Petersen, Kleintjes and Bhana (2012:404) specify that resources for mental health are insufficient, especially resources for mental health concerns of children and adolescents. The cost of mental health has an impact on these limited resources, as South Africa is still in the process of addressing the social



injustices from the past; therefore, these factors have an impact on mental health issues. Nydén, Myrén and Gillberg (2008:147) indicate that the cost of mental health, calculated nine years after the diagnoses of mental health problems, has a significant effect on the individual, his or her family, as well as society. Sibley, Waxmonsky, Robb and Pelham (2013:40) are of the same opinion regarding the cost after diagnosing mental health problems. For example, in the new edition of the *American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders* (DSM-5), the criteria for attention deficit hyperactive disorder (ADHD) indicate that diagnoses will increase the burden on resources of school districts and care service providers during the diagnostic process.

In South Africa, the need for care of mental health matters is of critical prominence, as mental health matters are intensifying. The South African society, with its socio-economic difficulties, contributes to the vulnerability of people and communities. Raman and Janse van Rensburg (2013:363) emphasise the vulnerability of children whose parents are deceased, separated or divorced, or of low income, and children in children's homes, staying in informal settlements or apartments where they are at a higher risk of being sexually abused. The violent past of South Africa contributed to a violent history that is still reflected in our society today. Bach and Louw (2010:25) reported as follows on the prevalence of violence: "...it was found that 95% of the Xhosa speaking children in the Western Cape had witnessed violence, while 56% of the children had been victims of violence themselves". They further stated that 52% of learners in the Northwest Province reported witnessing a rape and 56.6% observed a murder (Bach & Louw, 2010:26). The mental health of young people is a key factor that needs to be addressed. In Patel, Fisher, Hetrick and McCorry (2007:1302) it is confirmed that self-harm and suicide are leading causes of death among young people. Khasakhala, Harder, Williams, Stein and Ndeti (2011:134) verify the suicidal data in South Africa – "...recently data from a nationally representative sample in South Africa revealed comparable estimated lifetime prevalence of suicide ideation (9.1%), plans

(3.8%), and attempts (2.9%) to more developed countries". Both children and adults within our communities are vulnerable, and the following studies are confirmations of mental health concerns in South Africa.

In my personal experience as an educational psychologist who has worked within a multicultural setting in rural and urban areas, with 11 official languages, all these factors naturally lead to a challenging therapeutic environment. The need to attend to mental health issues needs to be considered and addressed. Educational psychologists must be co-players in assisting with mental health matters. Varied therapeutic tools must be considered in therapy with clients in the diverse South African context. This might contribute to the psychological wellbeing of South African communities and young people.

Vartanian (2012:n.p.) states that "in 2011 there were 140 billion photographs on Facebook, which is ... wait for it ... 10,000 times larger than the number of photos in the collections of the Library of Congress". Visual images form a significant part of everyday life and are increasingly part of an individual's life world, with the ever-expanding utilisation of images in our everyday life. With the prevalence of social media, digital technology – especially the use of smart cellular phones – photographs are becoming one of the most popular media tools that are being used in the communication process. Adults and children alike create visual artefacts of their life worlds, portraying meanings of relationships with others, objects and the self. The creation of photographs is naturally accessed by children and adults. Wheeler (2009:67) commented as follows on this aspect: "...the everyday use of the domestic photographs as one of the most widely practise forms of art making, with the easily assessable inbuilt cameras in cell phones".

The use of photo therapy is not new in the study of psychotherapy, with a wide range of research being done in this field (Berman, 1993; Hogan, 1981; Fryrear, 1980; Krauss,

1980; Stewart, 1979; Weiser, 1993; Wheeler, 2009; Wolf, 2007). Weiser (2014:23) explains photo therapy, as conceptualised for this study, as follows:

Photo Therapy Techniques use therapy clients' own personal snapshots and family photos (and the feelings, memories, thoughts and information these evoke) as catalysts for therapeutic communication and healing. This article discusses this flexible system of interactive techniques and demonstrates how they can be used by any kind of trained Therapist regardless of conceptual orientation, professional affiliation, preferred intervention model or approach (or degree of prior familiarity with photography itself).

Leading figures in photo therapy, Krauss and Fryrear, discuss 12 broad areas in the use of photo therapy in their book *Phototherapy in Mental Health* (1983). The focus of this book is on the usefulness of photographs in evoking memories and emotions, eliminating verbal behaviour, creating expressions and serving as an adjunction to verbal therapies, non-verbal communication between client and counsellor, documentation of change, modelling, attaining of a new skill, assistance with socialisation, understanding of certain experiences, self-confrontation and photo therapy training (Krauss & Fryrear, 1983:4). Judy Weiser, in her book *Photo Therapy Techniques* (1993), explains the five techniques of photo therapy she utilises in counselling sessions, as well as the significant importance of the expressiveness of the photograph as a medium to assist in therapeutic relationships. The research in photo therapy is dynamic and interesting, with active photo therapists in Canada, America, England, Finland, Israel, Italy and Russia. The Fourth International Conference of Photo Therapy and Therapeutic Photographs during June 2008 in Finland and the Photo Therapy Europe Learning and Healing with Photo Therapy Symposium in February 2011 revealed that vibrant research are being conducted in this field.

Photo therapy, as a therapy technique, has proven to be very successful in psychotherapy with clients (Berman, 1993; Fryrear, 1980; Hogan, 1981; Krauss, 1980; Stewart, 1979; Wheeler, 2009; Weiser, 1993). In a world where images are all around

us, and people tend more and more to communicate with images, it makes sense to use those images in psychotherapy. Loewenthal (2011:10) describes it as “talking picture therapy” in that the photographs are incorporated into any psychological therapy with the purpose to allow clients to express their problems.

### **1.3 Literature overview**

Photo therapy focuses on the use of photographs in a therapeutic setting with clients – photographs are used to express feelings, to evoke memories and to aid in the process of bringing unconscious aspects to the conscious in the therapy process (Weiser, 2017:1). Table 1.1 lists the different mental health workers using photo therapy in a therapeutic setting with clients.

**Table 1.1: Summary of mental health workers using photo therapy in therapeutic settings (adapted from Weiser, 2017)**

Number	Focus	Person	Country
1.	Psychologist who focuses on adoption and permanent care and is planning a dissertation incorporating photo therapy and “adolescent identity formation” in children who have experienced out-of-home care.	Phillipa Castle	Australia
2.	Photographic artist who graduated with a degree in philosophy, a psychotherapist, and a Winnicottian- and Jungian-oriented psychoanalyst, trained in Ericksonian hypnosis and brief therapy, with professional photographs in fine arts publications and exhibitions.	Emilie Danchin	Belgium
3.	Psychotherapist qualified in relational and family therapy, and gestalt therapy.	Mark Luyten	Belgium
4.	Psychologist and psychotherapist with schooling in expressive art therapy, psychodrama and psychoanalysis and is in psychoanalytic training.	Anastassia Kartsova	Bulgaria
5.	Psychologist and photographer who focuses on crisis work since 2000 for the Adolescent Crisis Response Program of a regional health department serving several major cities. Working in hospital emergency rooms, schools, and the community.	Jennifer Mervyn	Canada

<b>Number</b>	<b>Focus</b>	<b>Person</b>	<b>Country</b>
<b>6.</b>	Psychiatrist and photographer; one of the original establishers of photo therapy (especially regarding photo-projective techniques).	Joel Walker	Canada
<b>7.</b>	Licensed psychologist, registered art therapist, and one of the initial forerunners of photo therapy techniques.	Judy Weiser	Canada
<b>8.</b>	Professor emeritus of the University of Alberta, is a registered psychologist in private practice who practises as a teacher, psychologist, professor, inspirational speaker and author. Ultimate interest in therapeutic writing and photography.	Ronna Jevne	Canada
<b>9.</b>	Licensed psychologist in private practice and a professional photographer with several publications and exhibitions of his work. Defined as integrative, Mannermaa's Photo Therapy Psychotherapy practice includes both groups and individuals.	Lauri Mannermaa	Finland
<b>10.</b>	Licensed professional psychotherapist in private practice and an education coordinator for the Centre for Extension Studies at the University of Turku (Finland).	Ulla Halkola	Finland
<b>11.</b>	Licensed psychologist and member of the Greek Association of Drama Therapists. She is interested in the multimedia connections between the arts and latest technologies.	Dimitra Stavrou	Greece

<b>Number</b>	<b>Focus</b>	<b>Person</b>	<b>Country</b>
<b>12.</b>	Registered psychotherapist, photo therapist, family and couple therapist, dance-movement therapist, programme director, artist, lecturer, teacher, trainer and consultant, with a private practice in psychotherapy and phototherapy at her clinic in Tel Aviv.	Anat Botzer	Israel
<b>13.</b>	Certified psychotherapist (MSW), trained in psychoanalytic and family therapy. She focuses on couples and individuals in her private practice.	Nirit Lavy Kucik	Israel
<b>14.</b>	Psychologist and psychotherapist and also a photographer. She founded the association Art'è Benessere, which runs the Studio Art'è Benessere, which concentrates on photo therapy and therapeutic photography techniques.	Antonella Cunsolo	Italy
<b>15.</b>	Psychologist and psychotherapist who works for the National Public Mental Health Service (U.F. Salute Mentale Adulti ASL2 Piana di Lucca) of Tuscany in Italy.	Carmine Parrella	Italy
<b>16.</b>	Registered doctor in medicine and a licensed psychoanalyst (and IAAP member), working in private practice, undertaking workshops on therapeutic photography in Italy.	Fabio Piccini	Italy
<b>17.</b>	Licensed psychologist, educated in psychology of art, photography, and adolescent psychology, and now training to become a psychoanalytic psychotherapist at Minotauro Specialization School for Adolescents and Young Adults. Dedicated in	Francesca Belgiojoso	Italy

<b>Number</b>	<b>Focus</b>	<b>Person</b>	<b>Country</b>
	using photography in her psychological practices, particularly focusing on the youth.		
<b>18.</b>	Psychologist and psychotherapist engrossed in the body-mind connection and its pertinence for psychotherapy. Creator of the psychocreativity method.	Francesco Bacci	Italy
<b>19.</b>	Psychiatrist and a transpersonal psychotherapist. She works in private practice using the biotransenergetica model.	Giovanna Calabrese	Italy
<b>20.</b>	Registered psychologist and psychotherapist. She works with psychodrama and active methods in both individual and group situations and combines them with photo therapy techniques.	Laura Perego	Italy
<b>21.</b>	Psychologist and art therapist, with a master's degree in Expressive Therapies and Mental Health Counselling, using photo therapy techniques with her clients (youth, as well as adults).	Marina Strauss	Italy
<b>22.</b>	Psychotherapist in private practice since 1980, specialising in gestalt therapy, counselling, video therapy, photo therapy, and other forms of creative interventions in the relationship with oneself.	Oliviero Rossi	Italy
<b>23.</b>	Psychologist and psychotherapist with training in brief psychotherapy, biosystemic psychotherapy, and EMDR techniques. An Italian professor of the Scuola di	Ricardo Musacchi	Italy



<b>Number</b>	<b>Focus</b>	<b>Person</b>	<b>Country</b>
	Psicoterapia Biosistemica and the Istituto di Psicosintesi, he has a private psychotherapy practice with adults and couples. Educator of photo therapy techniques.		
<b>24.</b>	Professor of Family Therapy and Psychiatry at the University of Siena. He started the Istituto di Terapia Familiare di Firenze in 1981 and has since then applied and trained other psychotherapists to use visual arts, particularly photos and movies.	Rodolfo De Bernart	Italy
<b>25.</b>	Psychologist and couple and family therapist at the National Institute of Paediatrics in México City, where he works as the coordinator and training supervisor of the Master's Program in Family Therapy at the Instituto de la Familia (IFAC).	Francisco Avilés-Gutivérrez	Mexico
<b>26.</b>	Psychologist, trained in social psychology, and personal and family psychology treatment.	Olga Perevezentseva	Russia
<b>27.</b>	Psychologist, neuropsychologist and gestalt psychotherapist (affiliated to the Spanish Association of Gestalt Therapy) with a private practice in neuropsychology, psychotherapy and phototherapy.	Begoña Martínez Pelegrín	Spain
<b>28.</b>	Psychiatrist and gestalt psychotherapist focusing on photography with patients, especially the family album, the self-portrait and the projective techniques.	Cesar Cerón	Spain

<b>Number</b>	<b>Focus</b>	<b>Person</b>	<b>Country</b>
<b>29.</b>	Photographer and licensed psychologist, specialising in gestalt therapy and qualified as a couple's therapist.	Jose Bravo	Spain
<b>30.</b>	Gestalt psychotherapist in private practice and as a fine art photographer.	Cam Field	UK
<b>31.</b>	Registered art psychotherapist working in a child and family therapy clinic.	Mark Wheeler	UK
<b>32.</b>	Family therapist, PhD psychologist, and SoulCollage® facilitator. Her psychotherapy attention from 1979 centres around life-cycle stages, playfulness, imaginativeness and the expressive arts. She uses cameras, photography, journaling and visual journaling with families, couples and individuals in her private practice.	Army Miller	USA
<b>33.</b>	Psychiatric nurse and certified sex therapist in private practice. She utilises patients' own photographs in therapy sessions.	Catherine Ravella	USA
<b>34.</b>	Photo-remittance with seniors. Licensed psychologist, certified chemical dependency counsellor, musician and professional photographer.	David Krauss	USA
<b>35.</b>	Psychotherapist in private practice and fine arts photographer, joined these interests by focusing on workshops "Developing the Inner 'I' — Self-Discovery Through Photographs".	Maureen Rosenblum	USA

Number	Focus	Person	Country
36.	Licensed marriage and family therapist in private practice in South Florida, Creative Solutions Therapy, which concentrates on aiding individuals, teens, and families with issues such as self-esteem, trauma, depression and communication problems.	Nakya Reeves	USA
37.	Licensed mental health counsellor in private practice, as well as a global life and relationship coach. Qualified counsellor, art therapist and hypnotherapist with longer than 30 years' experience in the mental health profession.	Sharon Sanborn	USA

Table 1.1 indicates that photo therapy is a therapeutic technique that is not well known in South Africa. I experienced problems in finding research on photo therapy in South Africa, as research on this aspect is limited. Consequently, I wanted to expand my studies on the subject, as photo therapy is a phenomenon I had researched during my master's studies. The use of photographs as a therapeutic tool was an interest I wanted to pursue further. During my master's research, the results indicated that educational psychologists may employ photo therapy as a therapeutic tool when dealing with adolescents' self-concept problems (Van der Merwe, 2011). It revealed that photo therapy can assist in the therapeutic relationship in the following manner:

- It is a comfortable medium, as many adolescents may feel insecure when creating artwork, but will most probably be more confident when taking photographs as it is part of their everyday life experience.
- The photograph serves as a narrative moment in the individual's life, whereby clients can explore the stories of their life span. This research is a new and safe way of exploring, and in the same process clients gain insight into difficult aspects of their life path.
- The use of the visual focal point assists the client to focus on a tangible object and therefore feels more comfortable in the therapeutic setting. The client can focus on the photographs and does not feel as exposed as when talking about issues.
- A positive therapeutic climate is being established as the client is engaging with photographs out of his or her own life world. This focus on the artefacts of the client's life world makes therapy meaningful to the client.
- The interchange between the therapist and the client is more tangible than the verbal interchange. The client and therapist each observe, in a different way, people, places, objects and the self. The relationship among these different aspects and how the relationships influence the relationship with the self, others and objects can then be explored in a safe therapeutic environment.

- 👁️ The photographs become visual artefacts whereby the visual prompts assist in the understanding of the self. It further assists educational psychologists to understand the clients from their own frame of reference.

In my master's studies, I came to the understanding that photo therapy is useful in psychotherapy with clients. In my private practice, clients, especially the younger generation, bring their photographs mostly on their electronic devices. I therefore contemplated developing an electronic photo therapy tool to be used by educational psychologists in therapy with clients. It was further important to explore the development of a photo therapy tool in the context of the South African multicultural society where diverse psychosocial needs exist (as explained above in Section 1.2). This multifaceted topic guided my choice of a research topic.

#### **1.4 Purpose statement**

The purpose of my research was the design and development of a photo therapy tool to be used as a therapeutic tool for educational psychologists in the South African context.

#### **1.5 Research questions**

The research questions provided direction for the study, for instance what type of data should be collected that would eventually assist with reaching a deeper understanding of the research topic. I therefore proposed the following primary research question:

**Can a photo therapy therapeutic tool be designed and developed for educational psychologists within the South African context?**

The following sub-questions arose:

- 👁️ What are the perceptions of educational psychologists on the newly developed photo therapy tool?

- What are the perceptions of young adults on the newly developed photo therapy tool?
- How do educational psychologists experience the usefulness of the newly developed photo therapy tool as a strategy of intervention?
- How do young adults experience the usefulness of the newly developed photo therapy tool as a strategy of intervention?

Therefore, the following assumptions were proposed for this study:

- The newly developed photo therapy tool will be evaluated by the educational psychologists, as a constructive therapeutic tool to be used in the diverse and multicultural therapeutic domain of the South African context.
- The newly developed photo therapy tool will be evaluated by young adults as a positive and relatable tool that considers their life worlds.
- The nature of the developmental intervention method is focused on the developing process, therefore implying a continuous process. The newly developed photo therapy tool will be continuously updated as our life world changes and the South African context develops and changes all the time.

## **1.6 Aim of the study**

The broad purpose of the research is the design and development of a photo therapy tool, using photographs as a focus tool in the South African therapeutic context. The following aspects are further focused on:

- To explore the phenomenon of photo therapy by conducting a literature study.
- To design and develop a photo therapy tool by conducting a developmental intervention research design.
- To evaluate the perceptions of young adults on the newly developed photo therapy tool.

- To evaluate the perceptions of educational psychologists on the newly developed photo therapy tool within a South African therapeutic setting.

### **1.7 Theoretical paradigm of the study**

The theoretical framework provides the reader with clarification of the theoretical paradigm used in the particular study. Research takes place in a specific context, as the researcher must place the study in an argumentative framework.

The overarching framework and the nature of the study is psychological constructivism, which focuses on responding to perceptions and experiences by creating, storing, regaining, recovering, applying and reviewing meanings (Toomey & Ecker, 2007:205). Psychological constructivism, according to Richardson (2003:1625), concludes that it focuses on the meaning attributed to life experiences by the individual and the shared meaning in a social group context. I therefore proposed the following constructions of my own understandings, as I was influenced, during my studies, by various theories and ideas that shaped my outlook on therapy and my approach to clients.

The construction of my paradigm framework as an educational psychologist started with my undergraduate studies and exposure to Jung's theories. I was fascinated by his work on dreams and symbols, and that we are able to reconnect parts of the self by exploring these symbols in dreams. Jung (1977:18) states that the understanding of dreams has assisted in the exploration of the unconscious aspects and nature of the conscious psychic and to understand it, Jung comments "these images are by that that very fact presented to consciousness; the unconscious has its mirror image held up to it, in which it recognizes itself and by which it is brought to reunite itself with consciousness." In the exploration of symbols, the mind is led to the transcendent nature and unexplainable events. Symbols are unconsciously being used in our dreams (Jung, 1977:185-186). The creation and exploration of symbols is an interest I pursued

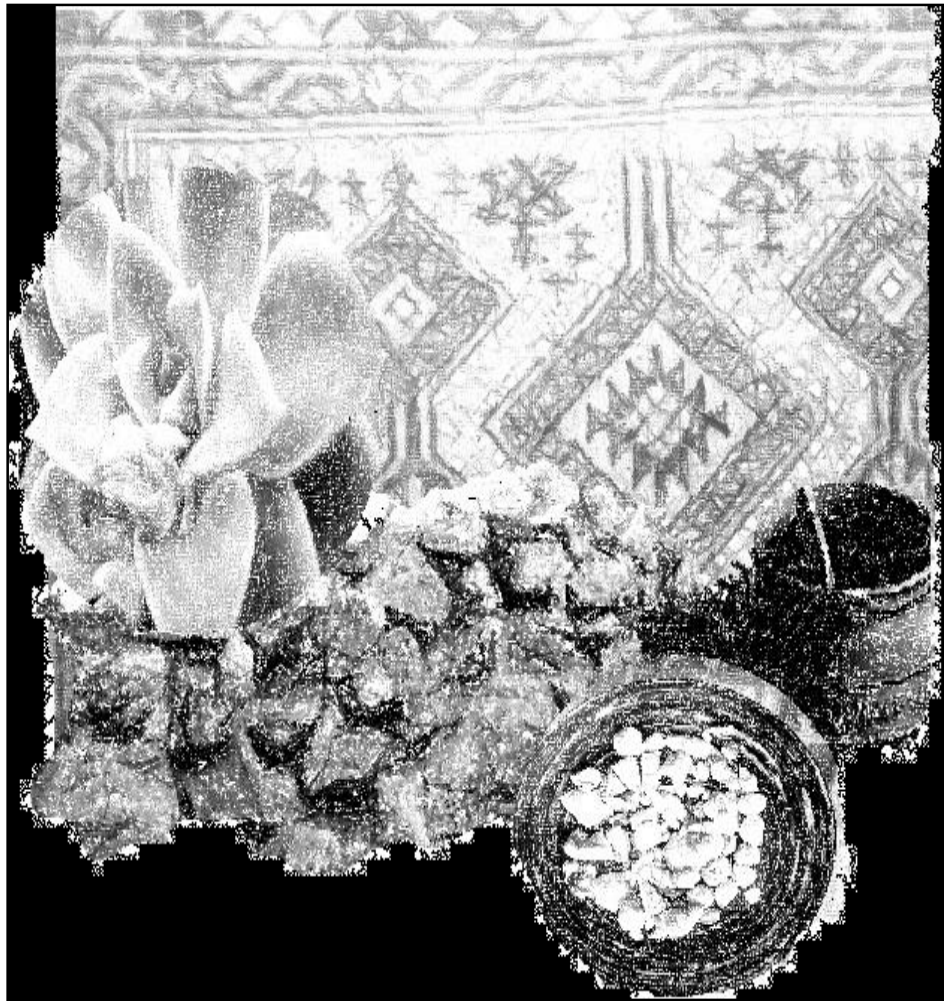
in my own creative exploration, as expressive creations have always been a way for me to 'work' through my own feelings. My interest in symbols as an expressive means of understanding and exploring the self and the different influences on the self was shaped by my interest in the artwork of the Dada and surrealist art movements, where artists employed techniques such as photomontage to explore meanings. The photomontage method used free association to reflect the working of the unconscious mind (Boucher, 2014).



**Artwork 1.1: Hannah Höch, Da-Dandy (1919)**

**Private Collection, Berlin (Boucher, 2014)**





**Artwork 1.2: The researcher's own artwork influence by the Dada period**

As stated, I also turned to expressive techniques to understand and work through personal issues and assistance with self-awareness. It naturally followed that I wanted to explore the expressive therapy in my profession as educational psychologist. I perused the work of Natalie Rogers, the daughter of Carl Rogers, and the use of expressive therapies in the healing process of emotional issues in clients. Rogers (2004:11) states that the expressive arts are the utilisation of movement, visual art, sound, and journal writing with sparse verbal expression, which contribute to tapping into the unconscious, our archetypal persona, and assist in bringing insight to personal issues. The expressive therapies are an inner, deep expression of feelings (Rogers,

1993:2). Rogers (1993:2) clarifies this aspect as follows: "We express inner feelings by creating outer forms." She divulges that insight can be gained by exploring the symbolic and metaphoric messages of expressive works; these creations are a way for the unconscious to speak and have personal meanings for each individual (Rogers, 1993:2-3). In creating symbols with art therapy, and later on in photo therapy, I realised the extreme power that lies in self-impressions, self-portraits, self-photographs and the exploration of our own symbols and creative expressions in a therapeutic environment. Jung (1940:3) comments on drawings as "psychological magic" in a therapeutic setting, and that "instead of being in a subjective state, he is confronted with objective form that reflects the psychological situation". The same can be argued of photographs, namely that photographs confront the client and support an understanding of the psychological issues.

I was further influenced by Jung's idea of 'individuation', defined as "the psychological process that makes a human being an 'individual' – a unique, indivisible unit or 'whole man'" (Jung, 1940:3). Jung offered insights on individuality and the notion that during a life span, the individual grows to understand the self. This realisation of the self is not an easy quick insight, but the individual has to confront his own shadowy side. The client must confront him- or herself, and all aspects of the self – the good and the bad – which is not an easy task. In order to assist the client in this process, the therapist's role to create a positive therapeutic relationship where the client can feel safe, is of the utmost importance. The approach of the therapist towards the client is important, thereby creating and developing the therapeutic environment. A safe therapeutic space must be created, where the client can explore all aspects of him- or herself in a milieu that gives the client permission to be him- or herself. Kirschenbaum and Jourdan (2005:48) indicate that several schools in psychotherapy are becoming aware of the importance of the therapeutic relationship as a way (and the main aspect) of therapeutic change. I drew inspiration from Rogers's 'client-centred approach' and 'positive regard' for the client. His theories had a severe impact on my approach

towards clients. Rogers's techniques of empathic listening and placing the client in the centre formed an important aspect of my approach to therapy. I shared Rogers's (1980:8) sentiments that he experiences joy when he really hears a client. He elucidated on the art of "hearing deeply" and added, "I mean that I hear the words, the thoughts, the feeling tones, the personal meaning, even the meaning that is below the conscious intent of the speaker" (Rogers, 1980:8). Thorne (1992:45) states that Rogers's approach of a deep understanding and respect for his client is commendable. This should be the therapist's responsibility, namely to really understand the inner world of the client. I treated this as one of the core aspects in therapy – to really understand the inner world of the client. Through expressive therapies and photo therapy, the client's defence mechanisms are lowered and glimpses of the inner world are revealed.

The study is embedded in South Africa, and therefore I was influenced by the values of the Afrocentric worldview. The study attempted to abide to the following *Ma'at* as standards for an Afrocentric approach, with the following Afrocentric principles, as conferred by Van Wyk (2015:9-10):

- **Ukweli** is a construct in research to represent the truth of peoples' experiences.

In the research, I attempted to follow the principle of Ukweli, in that the community of this research field – educational psychologists as well as the young adults of South Africa – will continuously be included in the process of the intervention developmental research process to assist in co-constructing this photo therapy tool that may assist educational psychologists to understand the young adults' life worlds.

- **Maelewanos** is creating harmony and expressing appreciation and gratitude towards the community.

Maelewanos is to establish and strengthen relationships among people for the sake of human dignity. I will show my gratitude to the co-players in this research, in that this research would not have come to light without the input of all of them. This emphasises the value of *uButhu* – I am because of you. This research is, therefore, not a construction of the researcher, but a co-construction of many people, ideas and influences.

🕒 **Akiba Uhaki** is the criterion of social justice and order in research.

Akiba Uhaki in this research means that I have attempted to direct the research in such a manner that it enhances the dignity of the community. I have attempted in this contribution to further explore ways for educational psychologists that may lead to a better understanding of their clients and, in some way, address mental health issues, which may lead to people having a more dignified life and expressing their emotions, which may assist in their wellbeing.

🕒 **Ujamaas** is about working together towards mutual benefit and reciprocity.

Ujamaas means working with the community, as this research was meant for all educational psychologists working with mental health matters. The focus area is on uplifting the community on matters of mental health and ultimately on the wellbeing of our communities.

🕒 **Kujitooa** is a criterion of ensuring adherence to righteousness and showing commitment during the research process.

Kujitoo is upholding the code of conduct as a researcher and adherence to ethical principles in the approach to the research and the research participants to realise that they are co-constructors in the research process.

In the above discussion, I have constructed my own truths and how I perceive therapy and theories, and these ideas and theories have influenced my development as an educational psychologist and my own approach to therapy. The research is focused on developing a therapeutic photo therapy tool that can assist educational psychologists in understanding their clients' context; therefore, it necessitated the researcher to understand that meanings are being construed by the individual and the communities around them. The use of photo therapy plays an important role in dealing with clients. The first point of departure in the photo therapy process is to understand the symbols created by the individual, and the construction of his or her life world. By allowing the clients to construct their self worlds, they unwittingly reflect their own meaning of the self and their communities.

The clients' constructions are done within the individual, as well as in social systems. All of these factors attribute to the understanding of the self and others in a particular life world. In the South African context, the social milieu of communities plays a crucial part in understanding the self. The above aspects need to be taken into consideration in developing a photo therapy tool. These reflections are formed by the different interactions of individuals in their life world with others, objects and the self. This process is interactive and the individual construes the meanings thereof. Photo therapy assists the person in reflecting on the different meanings of the self and helps the person in a visual way to 'see' the self in a different way.

## **1.8 Research methodology**

The following is a summary of the research method. See Chapter 3 for a comprehensive discussion of the research methodology used in this study.

In order to reach the aim of the study, a developmental intervention research design was employed. I chose this specific design, as I needed to design and develop the new photo therapy tool and I had to employ a research design that would guide the process in a practical way. Thomas and Rothman (2009:4) argue that the intervention and development design falls in the domain of applied research. “[It is] directed toward shedding light on or providing possible solutions to practical problems. This design focuses on the ‘interceptive technology’ and not the relationship of the variables as in traditional research” (Thomas & Rothman, 2009:12). Intervention research designs follow the following phases: an analytical, a developmental and an evaluation phase. The aim is to develop workable technologies to serve humanity.

I used network sampling and quota sampling to select the participants. I needed experts in the field, educational psychologists and users of the tool, including young adults – the clients in the therapeutic process – to evaluate the newly developed photo therapy tool. The research therefore evaluated the tool to ascertain that the photo therapy tool would be useful for educational psychologists in the South African context. In order to generate data, I made use of focus group interviews. Nieuwenhuis in Maree (2007:90) indicates the advantages of a focus group. The focus group generates rich data as the participants’ responses evoke responses and lead to a deeper understanding.

The data obtained were analysed according to the micro-interlocutor analysis, as explained by Onwuegbuzie, Dickinson, Leech and Zoran (2009:13). In this process of analysis, the focus is on the ‘how’ and ‘what’ of member interaction. The collaboration between the moderator and focus group members, and the interaction between the group members may lead to richer data and improved meaning out of the data (see Chapter 3, Section 3.9, for an extensive description of the data analysis process).

## **1.9 Ethical issues**

Ethical issues are of the utmost importance, as these standards protect participants in the research. It is, therefore, necessary to enclose all research within ethical aspects. Connolly (2003:4) argues that research ethics is the contemplation of the conduct of the researchers towards their own personal behaviour and how the researchers relate to and treat people during the research. The focus of this is on the particular norms and behaviour the researcher needs to follow. It is important to remember that the research participants make a contribution to the research; therefore, to ensure their wellbeing was at the forefront of this research at all times. The South African Constitution (1996) states that people have the right to information and to be treated with respect and dignity. These rights underlined the broad spectrum of the study. The policies of the Health Professionals Council of South Africa, which form the basis of the ethical considerations, were included and considered in all aspects of the research.

The research was ethically cleared by the Ethical Committee of the University of South Africa (Ethical Clearance Number 2016/02/17/08962804/38/MC). The ethical considerations for this research entailed the following aspects: respect for the participants as persons, the right of fairness and objectivity, integrity, capability, confidentiality, the demarcation of roles, the right of participants to withdraw at any time during the research process without any consequence to them, and informed consent (see Annexures A and B for examples of the consent forms).

## **1.10 Research programme**

An overview of the research programme is presented in Diagram 1.2 below.



**Diagram 1.2: Overview of the study**

### **1.11 Summary**

Chapter 1 is an outline of and motivation for the study. Photo therapy seems to be a tool that can be used with a variety of clients in diverse settings. This left me wondering what the added value will be of providing educational psychologists with an electronic photo therapy tool to support them in a therapeutic environment. I also outlined the paradigm framework, psychological constructivism, which the study is grounded on. My choice of the developmental intervention methodology, which was used to answer the primary and secondary research questions, was also discussed. In Chapter 2 the concepts of photo therapy are explored, with the emphasis on different photo therapy techniques and tools being used in psychotherapy.





**Diagram 2.1: Overview of Chapter 2**

## CHAPTER 2: LITERATURE STUDY OF PHOTO THERAPY

*"Photo Therapy techniques use therapy clients' own personal snapshots and family photos – and the feelings, memories, thoughts and information these evoke – as catalysts for therapeutic communication during the counseling process" (Weiser, 2001)*

### 2.1 Introduction

In Chapter 1, I discussed the background of the study and my reasons for undertaking a study on the design and development of a photo therapy tool within the South African context. In Chapter 2 the concept of photo therapy is expatiated on to provide an understanding of photo therapy with clients in a therapeutic environment. A short synopsis of the history of photo therapy is provided. Thereafter photo therapy is discussed in depth to assist in coming to an understanding of the use of this technique as a therapeutic tool.

### 2.2 Concept clarification

It is, in the first place, necessary to define concepts, as there is some confusion with regard to different photo-based programmes. Concepts are clarified and understood in the context of this study:

- **Expressive therapy:** Malchiodi (2005:2) describes expressive therapies as the utilisation of art, music, dance/movement, drama, poetry/creative writing, play and sandplay within a psychotherapy framework, during counselling, in rehabilitation and health care. I argue that the inclusion of photographs in psychotherapy settings is an expressive means to assist in the therapeutic process.

- 📍 **Photo art therapy techniques:** Weiser (2016d) outlines that art therapy use art-based methods with therapists who have graduated in training and are qualified in art therapy to practise this safely and appropriately.
- 📍 **Photo elicitation (PEI):** Data collection methods are used to elicit comments from participants. PEI makes use of participants' photographs to facilitate a dialogue about the experiences of the participants (Torre & Murphy, 2015:2). The process of photo elicitation is described as follows: a theme is selected, participants are selected, the researcher and the participants take pictures of the theme or question, the researcher uses these pictures to guide and steer the interview with the participants, the data are analysed and the findings are reported (Torre & Murphy, 2015).
- 📍 **Photo therapy: Weiser (2016c) describes photo therapy as** *"therapy practices that use people's personal snapshots, family albums, and pictures taken by others (and the feelings, thoughts, memories, and associations these photos evoke) as catalysts to deepen insight and enhance communication during their therapy or counselling sessions (conducted by trained mental health professionals), in ways not possible using words alone"*.
- 📍 **Photo-voice: This is a photo-based qualitative research method.** Wang and Burris (1997) describe the three goals of photo-voice as follows: to facilitate people to document and reflect on community strengths and concerns; to encourage critical discourse and knowledge of photographs in large and small groups on important community issues; and to access policymakers.

- **Social action photography: Weiser (2016b)** declares that this is a method which objective is to improve wellbeing, to decrease social exclusion and to fashion positive changes at community level, in society, as well as in national and international spheres
- **Therapeutic photography:** Weiser (2016e) explains that this constitutes activities that are self-implemented and done by an individual (or as part of an organised group project), but it is important that no formal therapy takes place; therefore, therapists or counsellors are not involved in these activities.

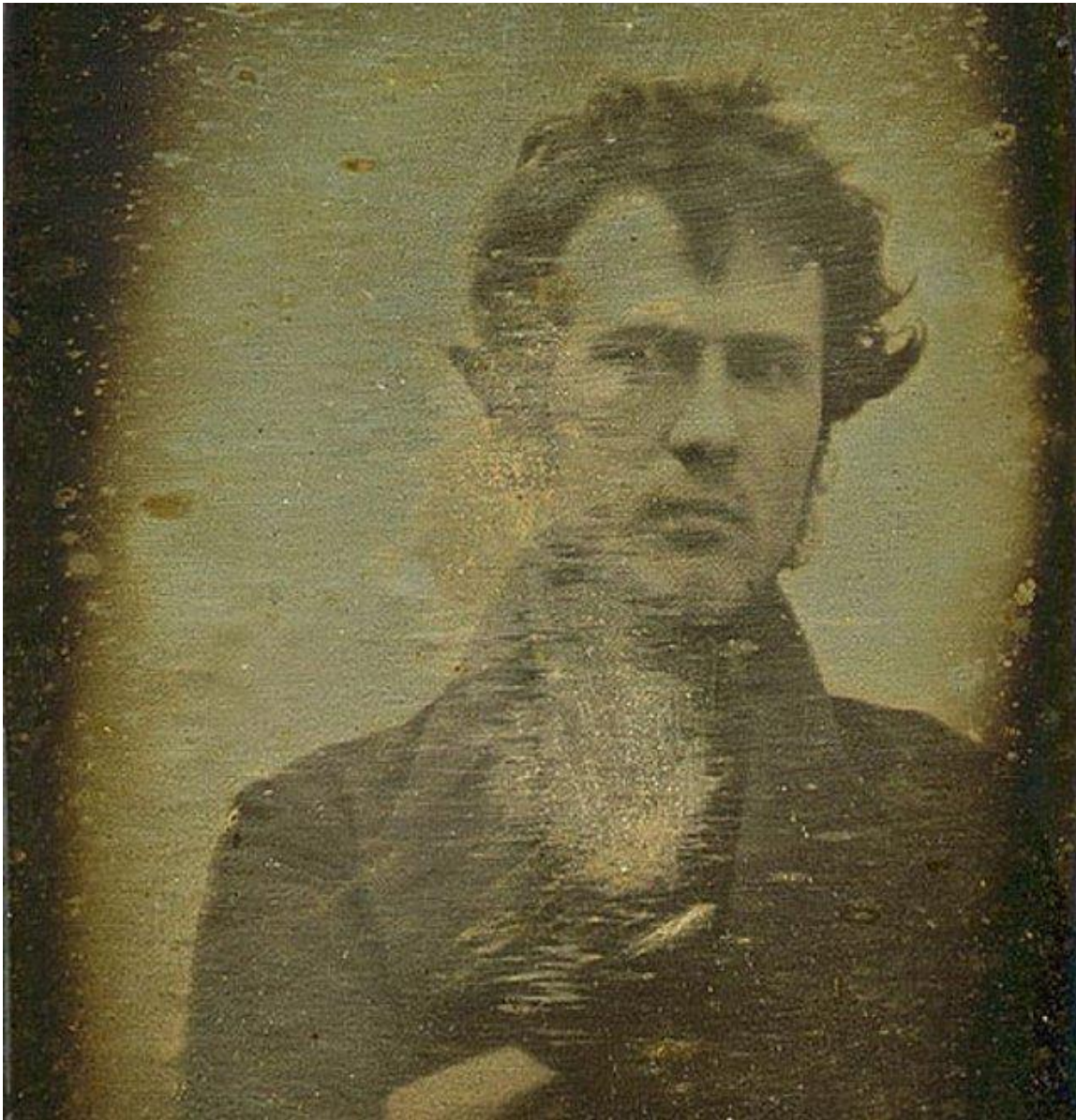
The study defined photo therapy as the use of photographs as an expressive tool in therapy with clients, to assist client and counsellor (trained mental health worker) in the therapy process. Weiser's (2014:162) understanding of photo therapy, as outlined for the study, is being drawn on:

Photo Therapy techniques are therapy practices that use people's personal snapshots, family albums, and pictures taken by others (and the feelings, thoughts, memories, and associations these photos evoke) as catalysts to deepen insight and enhance communication during their therapy or counselling sessions (conducted by trained mental health professionals), in ways not possible using words alone. It is extremely important to correct the erroneous belief that Photo Therapy techniques are just simply "Art Therapy using photos" as one more art medium during expressive arts or even collage activities. In fact, they are not "Art Therapy" at all... (Weiser, 2014:162)

### **2.3 History of photo therapy**

The use of photographs in households was captured by professional photographers until Kodak made it more accessible for ordinary people to shoot photographs (Wheeler, 2009:65). This made the ordinary photograph very assessable for people – the photographs became important for people to capture moments. The onset of the digital world and social media made the use of ordinary photographs easily accessible by just clicking and sharing with others. The first digital camera was developed in 1975,

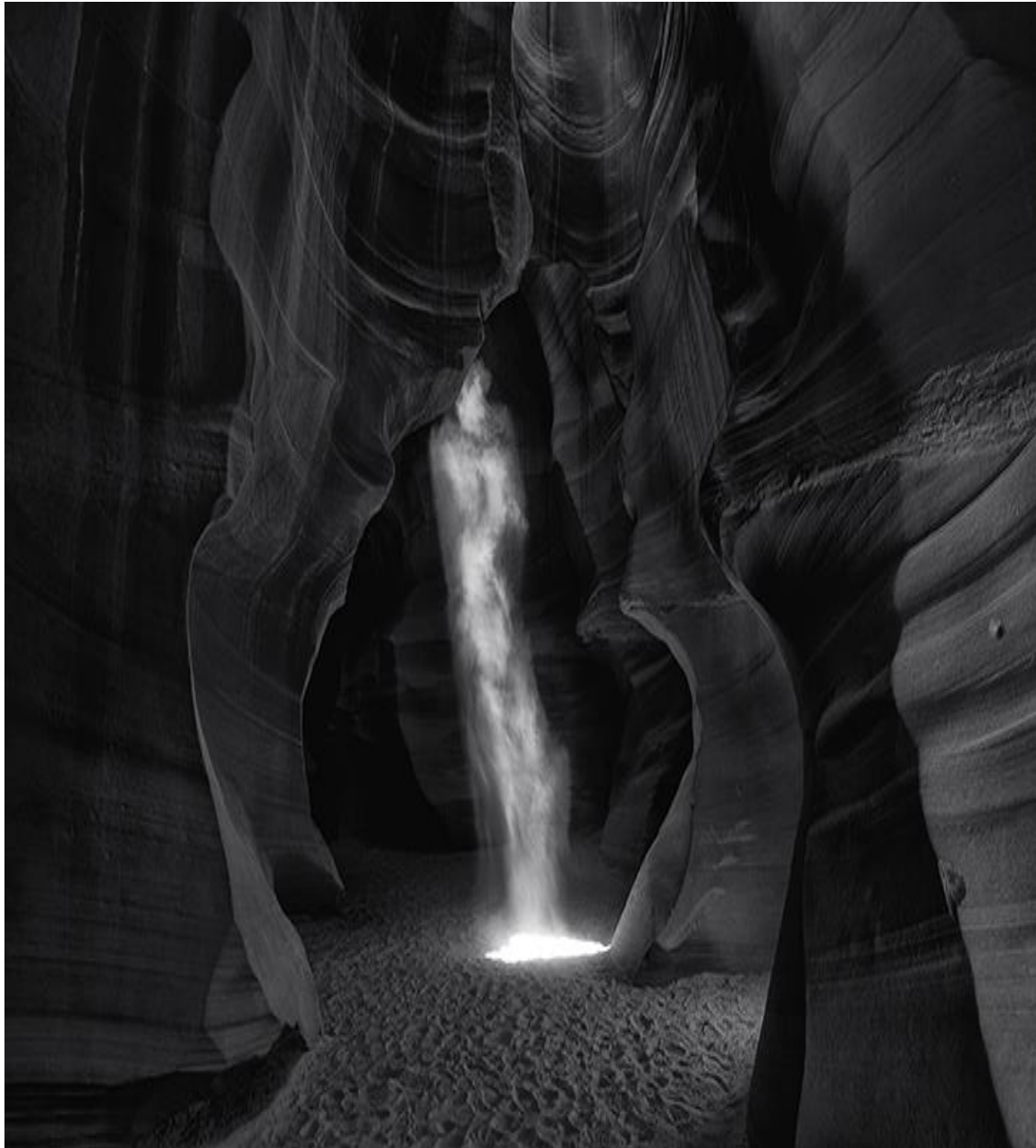
and it took 23 seconds to create a photo of 0.1 megapixel (Hugo, 2016). But, according to Archambault (2015), before ordinary photographs were easily accessible, the first self-portrait was captured by Robert Cornelius, in Philadelphia in 1839.



**Photograph 1.1: First self-portrait photograph  
(Archambault, 2015)**



The most expensive photograph is a Peter Lik nature photograph, Phantom 1999, which was sold for 6.5 million dollars (Hugo, 2016).



**Photograph 1.2: Peter Lik nature photograph – Phantom 1999  
(Hugo, 2016)**

The onset of the use of photographs in the therapeutic setting started, as mentioned by Perchick (1992) in Stevens and Spears (2009:6), as far back as 1850, in the treatment of patients in a psychiatric hospital. As far as can be established, the use of photographs with mental health clients actually started with Dr Hugo Diamond in 1852, at the Royal Medical Society in London (Buda, 2010:279). Nicolae G Chernbach used psychiatric photographs in 1870 at the Marcutza Asylum in Bucharest (Buda, 2010:289). In the more recent history of photo therapy, Weiser (2016a) used the term "Photo Therapy" for the first time in an article in 1975. In 1977 "*PhotoTherapy Quarterly*" came to light, which was established to promote photo-based therapy. Thereafter photo therapy grew as a therapeutic tool used with clients in a therapeutic setting (see Chapter 1, Section 1.2, where the vibrant and exciting work that is being done in photo therapy is elaborated on).

#### **2.4 Why photographs as therapeutic tool?**

"In photography, there are no shadows that cannot be illuminated," August Sander (1876-1964), a German portrait and documentary photographer, declared. This aspect highlights the art of photography, but this is also true of photo therapy, as photographs assist therapists to illuminate the emotional process in therapy. The photographs serve as artefacts (just as artefacts present clues for the archaeologist of the life world of people), the photographs assist the client – with the support of the therapist – to explore and illuminate clues that will lead to self-awareness and insight. The foundation of counselling, according to Steven and Spears (2009:3), is the advancement of the quality of life, the addressing and prevention of psychological problems and the development of coping approaches. Taking photographs is a practice that supports therapists in the process of counselling, as photographs serve as a worthwhile tool in therapy. Weiser (2004:32) further explains that photo therapy trainees need to be fully trained in the counselling process and thereafter need to be trained to use photographs in therapy. Though the artistic value of the photographs is not important for the photo therapy process, the expressiveness of the photographs

as a tool in the therapeutic process with clients is of great importance. Pryor (2011:331) explains the importance of photographs in psychotherapy as follows: "The use of photographs in the psycho-therapy serves to illuminate all aspects even the shadow aspects of the self, and to achieve wholeness as Jung indicates by achieving harmony between the conscious and unconscious." The photographs assist in the therapy process by bringing unconscious aspects to the fore. Kleckner (2004:24) denotes that "the photographs assist in opening the doorway to the unconscious" and that photo therapy in some way is "comparable to psychoanalysis as it aids the therapist and client to work past psychological hurdles, such as defence mechanisms". Kleckner (2004:24) stresses that the prominence of photographs as a therapeutic tool is "to help clients bypass the defensively guarded entrance into the mind, facilitating the process whereby unconscious thoughts become conscious".

Stevens and Spears (2009:3) concur that the foundations of counselling are the "promotion of human significance, dignity, individuality, and growth. Counselling addresses remediation and prevention of psychological problems, expansion of coping strategies, and enrichment of the quality of life". Therapy with young adults focuses on these foundations of counselling. Arnett (2007:68) suggests the use of "emerging adulthood" as a new term for the age group between 18 and 25. In this study, the term "young adults", as well as "emerging adults" will be used to describe the group of people aged between 18 and 25 years. Arnette (2007:69) argues that emerging adulthood is "the age of identity exploration, the age of instability, the self-focused age, the age of feeling in-between, and the age of possibilities". Photo therapy as a therapeutic counselling tool focuses on these areas of development, and assists in the exploration of these features of young adults in therapy to facilitate growth and development, to seek significance of being, and to create wellbeing (see Section 2.7 for different photo therapy applications with clients in therapy). In this creative method, the use of photographs does not require any artistic ability, as photographs are an easy and non-threatening medium for young people, as they are part of their



everyday experience. The use of photographs and selfies is part of their life world. Zeledón (2016:n.p.) reports that Samsung’s poll data in 2013 indicated that about 30% of pictures captured by adults between the ages of 18 and 24 years old, seem to be selfies. The utilisation of photo therapy as a therapeutic tool for this generation seems like a logical step, as they use photographs constantly in their everyday experiences.

The advantages of the use of photographs are numerous and are discussed in detail in literature (Halkola & Koffert, 2011; Heimo-Vuorimaal, 2011; Loewenthal, 2011; Martin, 2009; Weiser, 1993, 2004).

Diagram 2.2 illustrates the advantages of photo therapy with clients.



**Diagram 2.2: Advantages of photo therapy**

As seen in Diagram 2.2, the photographs in photo therapy allow for **unguarded expressions**, as clients do not feel the pressure of talking or expressing themselves in a direct manner. This allows clients to get comfortable in the therapy process, as it is

often difficult for clients to express their issues directly; the use of photographs might make it easier for some clients, as the focus is on the photographs and not directly on them.

Researchers in this field express the view that the **unintimidating** use of photographs is one of the best advantages of photo therapy, as it is part of everyday life, as people more often shoot photographs as expressions. Glover-Graft and Miller (2006:167) is of the opinion that the use of photographs in therapy is extremely useful, as it is not as intimidating as making use of art. People may feel inadequate to produce an artwork, but will mostly be more open to take photographs, as it is part of their everyday experience due to smart cellular phones with built-in cameras and the use of social media. Korteksky (2001:8) states that photographs assist senior people to “open up” as many of them grew up with the belief that one does not “air” issues openly. However, the focus on photographs feels non-threatening, which assists in the therapeutic process.

Steven and Spears (2009:4) mention that the **gaining of power** for clients that feel overwhelmed is also an important theme in photo therapy. The photographs serve as tangible moments in their lives; the clients explore their life story and gain power in the process. Kopytin (2008:50) states that photographs can assist clients to gain power in the process of creating photographs. The exploration of one’s own artefacts – photographs – gives one an opportunity to explore issues in a safe space, which may lead to new and alternative insights that can bring about the empowerment of the self.

One of the aims of therapy is to get the clients to view themselves, their experiences and their emotions in a different way and to become **self-aware**. This new awareness may then lead to change. Fryrear and Corbit (1992:3) mention, in their book based on Jung’s theories, that self-knowledge is important to create photo art therapy activities with self-knowledge as the goal. The utilisation of these artefacts from the clients’ life

worlds can assist in addressing trepidations in therapy, as the photographs are the voice of the clients. In a tangible way, they can express their emotions and feelings more freely, as the focus is not directly on them as clients but on the photographs. This assists in making them feel more in control of the process of therapy, and this leads to self-awareness and possible change. One of the techniques in photo therapy is the use of self-portraits to assist the client in reflecting on the self. The research study by Glover-Graf and Miller (2006:174) in photo therapy with chemically dependent persons, states that it seems that the reality of self-portraits evokes critique of their present lives. Nuñez (2009) mentions that self-portraits assist persons to look inside themselves and thereby the reflecting process becomes empowering.

The visual images contribute to the clients' and the therapists' **understanding of clients' life worlds** and their relationships within that world. Rossi (2014:191) comments on the construction of clients' life stories, and mentions that images are formidable in psychotherapy to increase clients' awareness. This insightful act could bring the therapist and clients together to construct their life stories. The construction of one's own stories, guided by photographs, will lead to a new understanding, insight and awareness of the life worlds of clients as well as that of the therapist.

The use of photographs aids clients in expressing their own life worlds, as well as those of the people and objects important to them within that world. Viewing this life world through photographs and thereby gaining new insights in this world results in making the therapy more **meaningful** to them. The focus is on their photographs and artefacts and not on them. It therefore becomes more sensible for them to explore the photos in therapy.

## **2.5 Neuro-psychological value of photographs**

Halkola (2009:21) states that current brain studies, by means of functional imaging techniques, provide exciting insights into questions on the importance of visual senses

and observance. Malchiodi (2003:18) confirms that research is linking the correlation between images and the impact it has on our bodies. Wheeler (2009:71) comments as follows in an article on the aspects of the physical brain and the psychoanalytical process:

...the electro-chemical routes, stimulated by photographs, of neural pathways through areas of the physical brain, seem to parallel the metaphorical traffic through metaphorical areas which resemble them in the psychoanalytic mind models, proposed to result from more three dimensional stimuli from the external world.

The memories and experiences of an individual are coupled and contribute to our individuality; these memories of experiences are called “autobiographical memories” (Sariñana, 2013). These memories and experiences rely on a specific area of the brain – the hippocampus (Sariñana, 2013). The hippocampus is situated in the medial temporal lobe and is responsible for the storing of long-term memories that include all past experiences and knowledge (Health Line, 2015). The visual sense is one of the most influential in forming memories; therefore, our autobiographical memories are predominantly visual (Sariñana, 2013). The neuropathways from the eye to the hippocampus are clearly recorded. Sariñana (2013) explains this process as follows: The light bounces from an object and makes connection firstly with the cornea, then it goes through the iris, (almost like an aperture of the camera), then through the lens where light is focused on the fovea of the retina. The visual information moves through the optic nerves, the optic nerves from each eye cross the optic chiasm, where the left and right visual worlds cross over. The thalamus, specifically the lateral geniculate nucleus, is one of the first parts of the brain after the optic chiasm to connect with. The thalamus is the gatekeeper of all sensory information (except smell). Information is then sent to the primary visual cortex, which is part of the occipital lobe. We perceive the image when it reaches the occipital lobe. From the occipital lobe, information is sent in two general directions – processing space and information of the object. This information is then combined and sent to the hippocampus. The hippocampus combines the

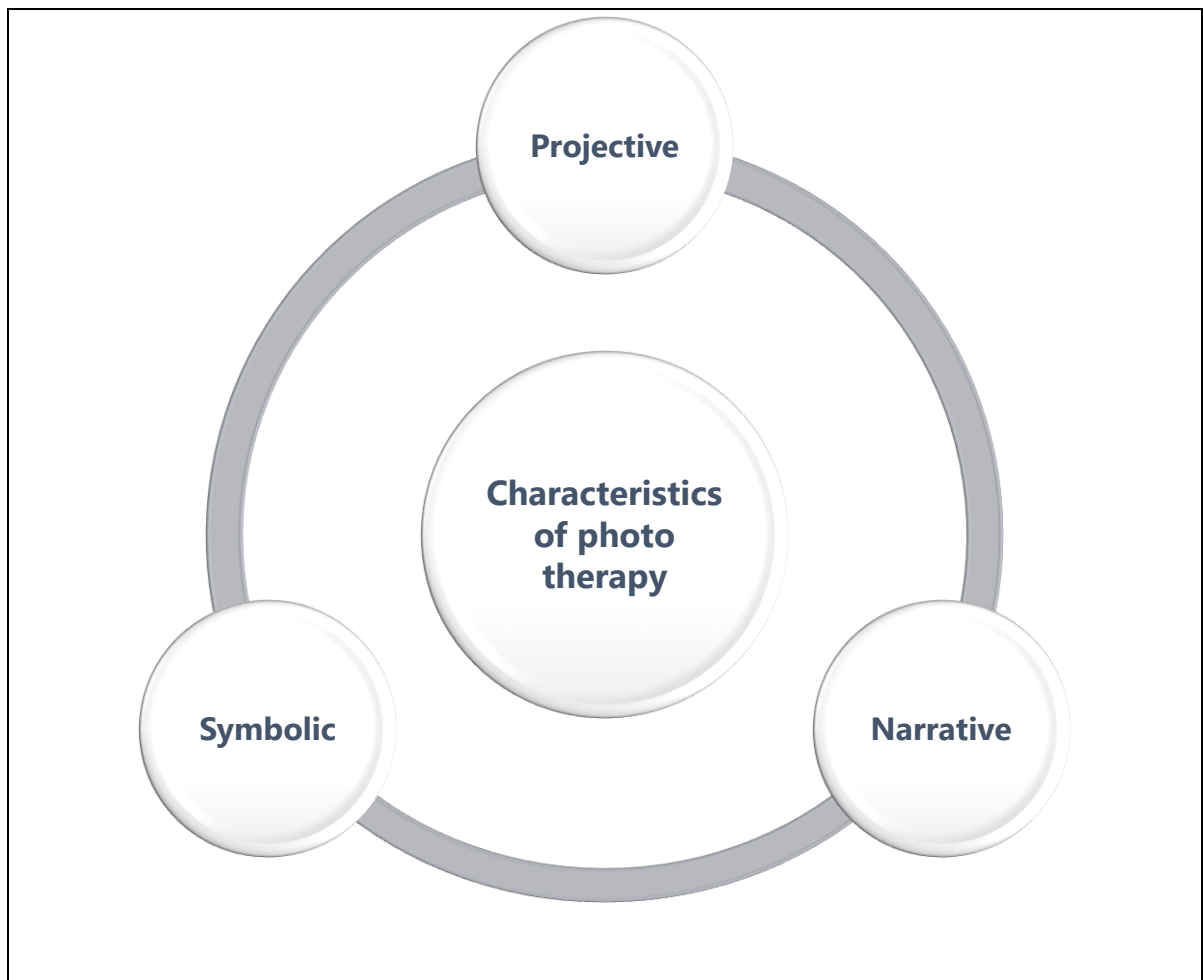
information of space and objects and makes it possible to create autobiographical memories (Sariñana, 2013).

The foundation of autobiographical memory is what has happened, where it has happened and when it has happened. In comparison, the photographs are holders of what, where and when – photographs capture life experiences (Sariñana, 2013). Sariñana (2013) argues that there is a connection between photographs and human memory – photograph are past lights that we sense in the present time, and memories are past experiences that we reminiscent on in the present. The photograph can consequently be a holder of those memories, and when we look at these photographs, they activate memories (Sariñana, 2013).

Photographs are the holders of memories within the realm of photo therapy. It is, therefore, the reason why photographs are powerful tools in therapy with clients, as photographs are being examined and explored in a safe therapeutic setting. It can be an influential therapeutic tool, and for that reason, the therapist must engage with clients in a safe therapeutic setting.

## **2.6 Characteristics of photo therapy**

The characteristics of photo therapy assist in the therapeutic process with clients. These characteristics, as portrayed in Diagram 2.3, lead to an understanding between the therapist and the client. In my practice and in dealing with clients, I have come to the realisation that photographs are formidable tools in the therapeutic process.



**Diagram 2.3: Characteristics of photo therapy**

### **2.6.1 Projective characteristics**

The projective quality of the photographs is one of the main themes of the photo therapy discourse. This characteristic allows for unrestricted expressions, as the clients are not necessarily aware that they are expressing their own issues and feelings, in that it decreases the pressure of talking or expressing themselves in a direct way, as the focus is on the photographs. Martin (2009:38) reports on the usefulness of projective photographs that are anonymous and decontextualised. These projective or symbolic photographs assist clients to express their feelings freely, as there is no conflict with personal loyalties or self-silencing. Peljhan and Zelić (2015:43) state that the meaning of a photograph comes from the individual; hence each photograph has an endless meaning. As a result, all interpretations of a photograph are correct; therefore, the

projective technique is an effective tool to develop and support self-awareness and self-esteem. Loewenthal (2013:9) and Weiser (2004:48) are of the opinion that photographs in therapy are a route to the unconscious as, according to them, the projective quality assists the previously repressed and assists in raising self-awareness in the therapeutic process. The use of photographs assists in the therapeutic process in that it unlocks the unconscious and assists clients to project and express their feelings, whereby their issues come to the fore.

### **2.6.2 Narrative characteristics**

The narrative quality of photographs is a theme that is also explored in literature, in that each photograph captures a moment in time and the known and untold stories contained in it, are then explored in the therapeutic setting with a therapist (Kopytin, 2004:49; Shechtman & Tsegahun, 2004:368; Weiser, 2004:23). Rossi (2009:11) mentions this narrative quality of the images: "The picture, as it is used in the therapeutic setting, has no value in itself as it is not the reality but the narration of what I as observer am looking at of the event from the viewfinder." Stevens and Spears (2009:6-7) mention that in photo therapy, the photographs are not only silently contemplated on, but are being actively created, posed for, talked about, listened to and remade to form and illustrate the life world narratives. These creations become art therapy expressions that can even communicate with other photographs.

In photo therapy, the client uses artefacts out of his or her own social world. These photographs are narrative moments whereby the client and the therapist can focus on and understand their social world. Therapy assists the client to bring forward these constructions to 'see' it more clearly and, with the guidance of the therapist, understand his or her own constructions better and challenge false perceptions of these constructions.

### **2.6.3 Symbolic characteristics**

Wheeler (2009:) indicates that the use of cell phone cameras makes photographs one of the most active forms of art-making. In the age of the 'selfie', people are expressing themselves and creating personal symbols as artefacts of a life lived, in the same way the Khoisan produced rock art as symbols. Lewis-Williams (2016:242:) comments as follows in his article on the Southern African San (Bushmen):

Rather than simply recounting the stories of San myths in the hope of finding "illustrations" of them amongst the images, greater understanding of fundamental beliefs and principles embedded in the tales and, moreover, in San thought and communication in general is needed.

This is also true of the modern photographs that represent photographic symbols of clients' life worlds. Embedded in these photographs are the beliefs, principles and tales of the individual, which, with the guidance of the therapist, can be explored in the use of photo therapy.

Jaffé (1964:249) mentions that "Dr. Jung has pointed out that a true symbol appears only when there is a need to express what thought cannot think or what is only divined or felt". The photographs become symbols of clients' emotions, which are sometimes difficult to express. The photo therapist needs to understand the deep meaning symbols have, as some fundamental beliefs are embedded in the modern photograph, which, in the process of therapy, can become evident and may lead to a better reflection on the self. Paintner (2007:2) indicates, "Carl Jung believed images are expressions of deep human experience and our authentic selves. They are the natural and primary language for the psyche and only secondarily do we move to conceptual thought." The use of photographs eliminates the processes of expressing that which is difficult to express – the photograph assists the client to open up and explore aspects in the subconscious mind. The photographs also assist in assessing unconscious symbols and creating a sense of meaning to the individual. The clients' life worlds need to be considered when examining symbols in photographs. Cultural tales, myths and



folklore need to be considered when interpreting symbols and the therapist needs to be sensitive towards these different and diverse meanings of different cultural groups.

## **2.7 Application of photo therapy**

### **2.7.1 Five photo therapy techniques (Judy Weiser)**

The photo therapy techniques, as described by Weiser (2013:1-2), involve “a 5-part framework that is deeply interconnected”. The five techniques described by Weiser are as follows:

- Material for projection
- Family photographs
- Photographs of the client as subject
- Photographs by the client
- Self-portraits

Weiser (2004:159) explains photo therapy as the practice of the employment of clients’ photographs and family photographs to educe “feelings, thoughts and memories (and related values, belief, attitudes, and expectations) in ways not possible when using other art media (or words) alone”.

### **2.7.2 Walker visuals (Joe Walker)**

Joe Walker, as a psychiatrist and photographer, developed his own ‘Walker Visuals’ for therapists. He realised the power of photographs in therapy and pioneered a method based on photo images. These Walker Visuals are being used by therapists with different clients – young and old – with all kinds of disorders and within diverse cultures (Walker, n.d. b).

### **2.7.3 Many Stories of Being (Ulla Halkola and Tarja Koffert)**

The 'Many Stories of Being' use the stories of children and adolescents arising from their life stories and their own life experiences. The main aim is the contemplation on narratives and identities. The technique can be used with other activities, such as music, dance, drama and writing (Halkola & Koffert, 2011:41). The process of the 'Many Stories of Being' is explained by Halkola and Koffert (2011:45-47) as follows:

Step 1: Orientation

Step 2: Looking at the autobiographical photographs

Step 3: Writing down associative words to photos

Step 4: Choosing a meaningful theme which originates from the words and photographs

Step 5: Choosing symbolic photographs

Step 6: Writing a text

Step 7: Sharing experiences in the group

Step 8: Future plan – finding empowerment elements in your life

Step 9: Continue with discussions, films, collages and dramatizing

This process helps young people to express themselves, as it is sometimes difficult for them to talk about their lives and their problems (Halkola & Koffert, 2011:50).

### **2.7.4 Talking picture therapy (Del Loewenthal)**

Talking picture therapy is the use of photographs with brief counselling and psychotherapy within any theoretical framework (Loewenthal, 2011:9). Loewenthal (2011:10) describes it as "talking picture therapy" and elaborates that it is a practice that may be assimilated into any psychological therapy of which the objective is to facilitate clients to speak about their distress. These stories assist clients and therapists alike to arrive at a secure therapeutic space where the stories that are captured in

photographs can be explored to lead to a new understanding, self-awareness and insight.

### **2.7.5 Re-enhancing photographs (Rosy Martin)**

Martin (2009:46) defines re-enhancing photographs as the invention of new photographic representations by means of re-enactments within the therapeutic setting. The photographs created by this process can be rearranged as needed; thus the photographs produced can be reordered at will, creating the possibility of telling many new stories, thereby hinting at new versions of longstanding realities. Martin (2009:41) further explains that the process of re-enactment photography "is about making visible process, change and transformation, by going to the source of an issue or an old trauma, re-enacting it and making a new ending, a new possibility, a new way of being, visible".

### **2.7.6 Digital technology in photo therapy (Robert Wolf)**

Wolf (2007:126) discusses the use of digital technology in photo therapy training of graduate-level art therapy students. This prepares prospective therapists to appreciate what their clients would certainly experience (Wolf, 2007:126). He elaborates on the use of creative projects that can be utilised and adapted for clients by considering clients' abilities for insight, contemplation and self-awareness. For example, a suggested project is to create self-portraits and leave a white space, using digital elaboration, and then write or draw responses to what is seen in the photo (Wolf, 2007:126).

### **2.7.7 Spectro Cards in therapy and counselling (Ulla Halkola)**

'Spectro Cards' were developed by Ulla Halkola and are used in the field of associative cards. Halkola (2011:9) explains that "photographs are looked at together and the meanings considered". The following series was created: Spectro Crisis, Spectro

Models, Spectro Graffiti and Spectro Cloud (Halkola 2011:15). "I have taken the photos and created the card series to be viewed and explored, respecting the diversity of life" (Halkola, 2011:47). She further elaborated on the usefulness of these cards in therapy and counselling by explaining the meaning of the cards (Halkola, 2011:23):

**S**earch essential emotions and thoughts

**P**ortray experiences and memories

**E**xplore, analyse and define

**C**reate something new

**T**ell stories

**R**ealise visions

**O**bserve, learn and find new perspectives

### **2.7.8 Life story, body image and coping skills (Liisa Heimo-Vuorimaa)**

This project is about assisting patients to cope with chronic pain and illness. In the process described by Heimo-Vuorimaa (2009:71), patients need to follow these steps:

- 1) Think about chronic pain and choose photos from a series to present their inner world.
- 2) Then choose photos that present security against the emotions from the pain.
- 3) Sharing photos in discussion, patients construct their life stories and body images.
- 4) Discuss how patients felt when they selected the photos.
- 5) Focus on the interpretation of the narrative, uncover new understandings and create new coping skills.
- 6) Then choose photos that represent the change they have experienced in this process.

## **2.8 Ethical considerations**

As a mental health worker, the concept of ethical conduct is of the utmost importance. Treating people with care and understanding is the core of therapy. In Chapter 1, Section 1.7.1, I discussed my own influences and approach to therapy with clients. Using photographs in therapeutic settings with clients, the therapist needs to take extra care. Hamilton (2009:89) suggests the following aspects when working with photographs: The therapist needs to consider that photographs are emotionally loaded and that clients, and especially children, may feel emotionally inundated by memories captured in photographs. The creation of a safe therapeutic space is important as the direct process of photographs may be overwhelming to some clients. The therapist who uses photographs always needs to consider the best interest of the clients and to proceed with therapeutic care.

## **2.9 Summary**

In this chapter, the use of photo therapy was discussed in depth to understand the phenomenon of photo therapy. Diagram 2.4 presents a summary of the various aspects of photo therapy.



**Diagram 2.4: Summary of photo therapy in Chapter 2**



**Diagram 3.1: Overview of Chapter 3**

## CHAPTER 3: RESEARCH DESIGN

*"...intervention research is distinguished by its emphasis on the design and development of interventions" (Fraser & Galinsky, 2010:460)*

### 3.1 Introduction

This chapter discusses the developmental intervention research design. The design was developed in human science to describe and evaluate a new programme, technique or tool. As the aim of this study was the development of a photo therapy tool, this design method, therefore, seemed the most appropriate. The method guided the research process. Thereby the development intervention research design is examined, and the steps to be followed in this type of research are elaborated on in this chapter. As the intervention developmental research design is complex, an in-depth discussion follows in Chapter 4, focusing on the specific process that was followed to develop the photo therapy tool. The selection of the participants, the data collection and trustworthiness of the study are discussed. The ethical procedures that have been considered, are also discussed. All research is underpinned within a theoretical position – the main position of the research study can be found in psychological constructivism.

### 3.2 Qualitative research design

A qualitative research design was selected for the study, as Niewenhuis (2007:78) explains that "this approach seeks to understand phenomena in context (or real-world setting)". Merriam and Tisdell (2016:15) explain qualitative research as being "interested in understanding the meaning people have constructed". The study focuses on the understanding of the phenomenon – photo therapy – and the constructions of the participants of the phenomenon under study. In this qualitative research, the focus is on the evaluation of the newly developed photo therapy tool. Hence, as Merriam and Tisdell (2016:4) explain evaluation research, the researcher



“collects data or evidence on the worth or value of a program, process or technique”. I wanted to evaluate the effectiveness of the photo therapy tool in order to guide the practical development of the photo therapy tool and the evaluation of the research. I selected the developmental intervention research design to guide the research process.

### **3.3 Developmental intervention research design**

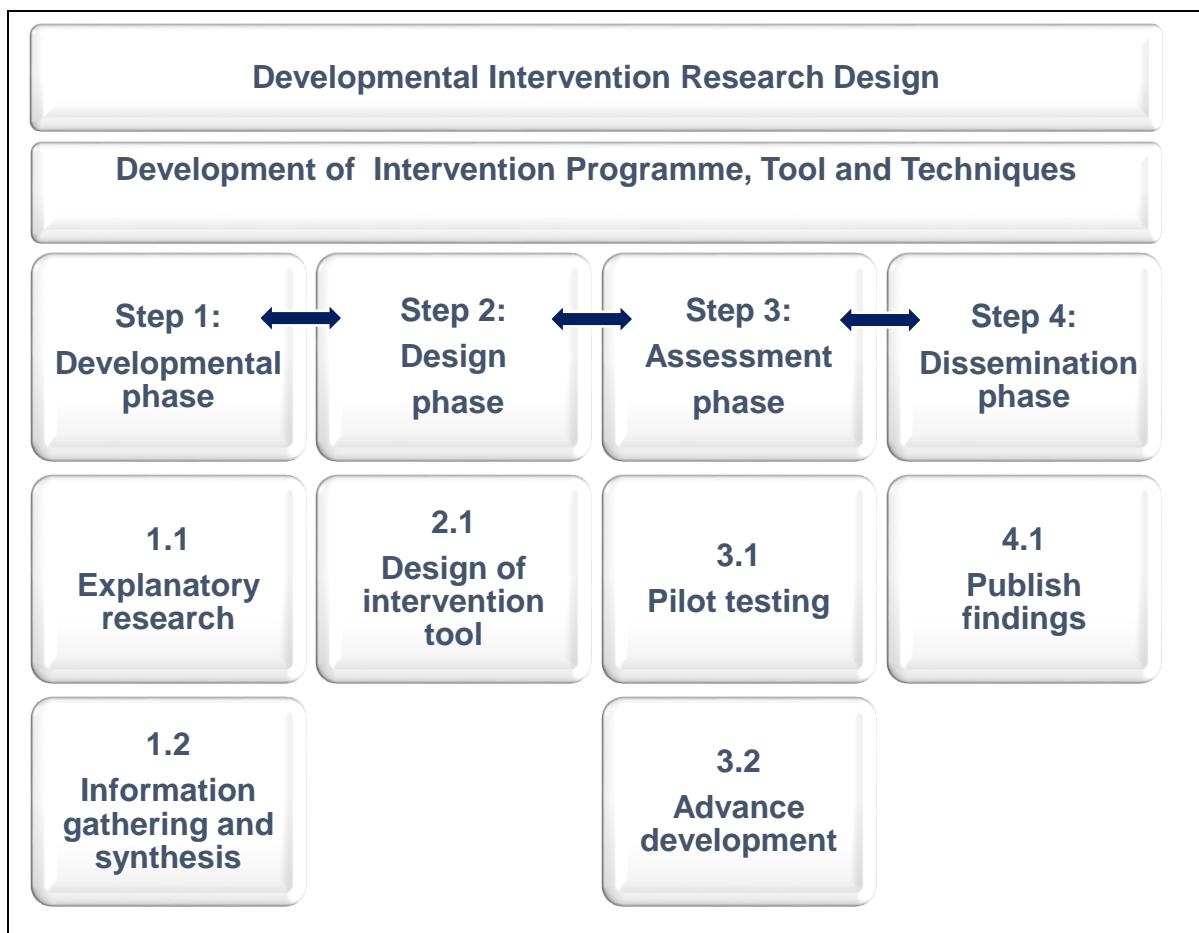
Rothman and Thomas (2009:28) postulate that researchers in the field of human sciences, social work, mental health and public health are searching for an approach that can produce practical applications for results obtained in the research. Fraser (2009:29) states that the intervention design was developed out of various disciplines – anthropology, engineering and social sciences. Intervention research has its roots in evaluated research, as the research focuses on solving practical problems (Fraser & Galinsky, 2010:460). The developmental intervention research design focuses on the design and development of interventions (Fraser & Galinsky, 2010:325). The pioneers in developmental intervention research, Rothman (1980) and Rothman and Thomas (1984), and more recent researchers such as Fraser and Galinsky (2010), state that developmental research is an ongoing process and develops interventions. Developmental intervention research is defined by the designs and the development of programmes for specific social problems, and to address the practical needs of human science researchers. Thomas and Rothman (2009:12) conceptualised design and development (D&D). Howe and Potvin (2009:1) are of the opinion that in intervention research, researchers should also seek and learn from implemented actions, so that those phenomena can be addressed, thereby improving practice. Intervention research focuses on developing a technology, a tool or techniques by the merging of existing research and theory with other knowledge, for example the insight into the practice setting, and creating intervention standards and action strategies (Fraser & Galinsky, 2010:460). According to Gilgun and Sands (2012:356), the term “developmental intervention design” is a more appropriate term, as the

system is forever changing and developing, and therefore practitioners must, on a continuous basis, redevelop intervention as the system changes. The rationale of choosing the developmental intervention method formed part of my practical approach to develop a photo therapy tool within the South African therapeutic setting.

### 3.4 Steps in developmental intervention research design

The developmental intervention research design has distinctive steps in the process of the development of an intervention tool to be relevant. These steps are important aspects, but are an ongoing process where development is of a continuous nature.

Diagram 3.1 illustrates the different steps to be followed to develop an intervention tool, as adapted from Thomas and Rothman (1994).



**Diagram 3.2: Steps of the developmental intervention research of this study**

### 3.4.1 Developmental phase

- 🕒 **Explanatory research:** The researcher's ideas and opinions are explored to establish if this research would be a topic that could be researched and explored.
- 🕒 **Information gathering and synthesis:** This step entails the study of the literature. Gilgun and Sands (2012:351) state that researchers need to peruse other interventions of the problematic areas they are interested in to fully understand the specific area of the intervention. An overview of the existing technology, tools and programmes is an important part of this step to determine the strengths and challenges existing in this field. Fraser (2009:30) suggests the gathering of information and the study of similar programmes to avoid duplications of programmes. A new programme can be developed or existing programmes can be upgraded. Gilgun and Sanders (2012:351) indicate that when the researcher understands the descriptive literature, he or she will design a developmental intervention programme that will be sensitive to the experiences of the target clients participating in the intervention programme. The following aspects are indicated by Thomas and Rothman (1994) as important key elements that must be defined at this stage: "Choice of level, whether individual, group, family, organisation, community, society, or a combination of these, may depend on research findings, theory, situational demands, or opportunities and funding."

### 3.4.2 Design phase

- 🕒 **Design of the intervention tool:** This entails the activities, as well as the nature of the activities, the purpose of the intervention programme, under what circumstances and by whom the tool will be implemented, and who the receiver of the tool is.

- **Evaluation of the design:** This phase implies the place where the evaluation of the intervention programme takes place (Strydom, Steyn & Strydom, 2007:332). This phase contributes to the further design and development of the intervention programme (Rothman & Thomas, 2009:14).

### 3.4.3 Assessment phase:

- **Pilot testing:** Gilgun and Sanders (2012:351) state that pilot testing of the intervention on a small sample is an important step following the design phase. This is carefully evaluated, the intervention is applied and the problematic areas that the pilot testing has brought to light, are reformulated. Thomas and Rothman (1994) explain the importance of target testing the intervention programme – pilot testing of the intervention programmes is persistent, until the programmes are fully and completely feasible, consistent with programme theory and potentially effective when being implemented.
- **Advance development:** The step is to produce outcome information as an important step in the development of the technological process. This may lead to further development if required, and leads to dissemination of the tested and evaluated intervention (Rothman & Thomas, 2009:14).

### 3.4.4 Dissemination phase

Thomas and Rothman (1994) mention that the intervention programme can recycle throughout the steps to refine the programme. After this process, the programme is ready for dissemination, which usually entails publication in academic journals, as the cost of programmes, tools or techniques is extremely high.

- **Publish findings:** After an intervention has sequenced through the first four steps (and sometimes recycled through steps), it is usually ready for dissemination. Research reports might have been published in academic

journals, but that does not mean that it has been read by practitioners, consumers and policymakers. Moreover, programme materials usually have not been published. Although these materials often have high practice relevance, it is difficult to publish treatment manuals, guides and training materials. High costs of publication, paired with potentially low profits for publishing houses, are a major barrier.

The developmental intervention research design for this study was selected for its practical process, with a variety of steps and processes. For practical reasons, this research process is elaborated on in Chapter 4.

### **3.5 Theoretical framework**

I researched the phenomenon of photo therapy in depth, and developed a photo therapy tool to be used by educational psychologists in therapy sessions with young adults. Kincheloe (2000) in Gordon (2009:39) confirms the important role the researcher plays in the construction of the research –

The angle from which an entity is seen, the values of the researcher that shape the questions he or she asks about it, and what the researcher considers important are all factors in the construction of knowledge about the phenomenon in question.

As discussed in Chapter 1, Section 1.7, I declared my standpoint as researcher, and the theories, beliefs and ideas that shaped my own construction of my life world.

Psychological constructivism is postulated in Chapter 1, Section 1.7, as the main paradigm for this research. Toomey and Ecker (2007:204-205) indicate that the main idea of psychological constructivism is that an individual constructs a life world of meaning that he or she occupies and experiences as real. Psychological constructivism displays a variety of truths, and people construct their own reality from their own perceptions and experiences (Hanley-Maxwell, Al Hano & Skivington, 2007:101).

Kincheloe (2000) and Thayer-Bacon in Gordon (2009:39) mention that knowledge is constructed by individuals in their interaction within the world. In this research process, a co-construction of meanings was exchanged in the research process, and a research relationship developed between the researcher and the participants.

### **3.6 Sampling**

The research utilised purposeful sampling, as I wanted to discover, understand and gain insight from the research. Hence, a sample was chosen from which the maximum could be gained (Merriam & Tisdell, 2016:96). The sample selection was done by network sampling and chain or snowball sampling; this implies that a few key participants, who easily met the criteria, were located and thereafter previous participants referred new participants who met the requirements (Merriam & Tisdell, 2016:98). The following participants were initially sought for the research:

- Emerging adults – the target market for the photo therapy tool
- Educational psychologists – the users of the photo therapy tool in therapy with clients (young adults)

The following criteria were set for the young adults' focus group:

- Emerging adults between the age of 18 and 25
- Willingness to participate in the study

Thereafter, quota sampling was done, as suggested by Moore (1993) in Lumandi (2015:236), who defines quota sampling as units that are selected on the foundation of predefined characteristics, so that the total sample has the same distribution of characteristics supposed to exist in the population under study. Quota sampling was used to select the participants for the young adults' focus group to represent the South African youth.

According to Statistics South Africa (2017), mid-year population estimates by population group, age and sex of 2017 of young adults between 18 and 25 years old in 2017 are as follows: black African 4 229 843, coloured 429 418, Asian or Indian 105 704 and white 266 305, making it a total of 5 031 271 young adults between the ages of 20 and 24 years old. Hence, Table 3.1 reflects the participants' diversity according to race.

**Table 3.1: Focus group: Emerging adults – 25 participants**

<b>Focus group: Emerging adults – 25 participants</b>			
<b>Black African</b>	84.07%	16.814	21
<b>Coloured</b>	8.53%	1.706	2
<b>Indian/Asian</b>	2.10%	0.42	1
<b>White</b>	5.30%	1.06	1

According to language statistics for 2011 (Statistics South Africa, 2011) the following home languages were spoken in South Africa. Languages statistics of 2011 highlight the diversity of the South African language context. Language was also a criterion for the young adult participants.

**Table 3.2: Focus group for emerging adults representing language diversity**

<b>Focus group: Emerging adults – 25 participants</b>		
<b>1. isiZulu</b>	23%	5.75
<b>2. isiXhosa</b>	16.0%	4
<b>3. Afrikaans</b>	14%	3.5
<b>4. English</b>	10%	2.5
<b>5. Sepedi</b>	9%	2.25

<b>Focus group: Emerging adults – 25 participants</b>		
<b>6. Setswana</b>	8%	2
<b>7. Sesotho</b>	8%	2
<b>8. SiSwati</b>	3%	0.75
<b>9. Tshivenda</b>	2%	0.5
<b>10. IsiNdebele</b>	2%	0.5

The following participants were, therefore, networked and selected to represent the diversity of the South African context in the focus groups for young adults.

**Table 3.3: Description of the participants of focus groups for emerging adults**

<b>Young adults: Participants for focus groups</b>		
<b>Participant</b>	<b>Race</b>	<b>Language</b>
<b>YA 1</b>	African / Black	isiZulu
<b>YA 2</b>	African / Black	isiZulu
<b>YA 3</b>	African / Black	isiZulu
<b>YA 4</b>	African / Black	isiZulu
<b>YA 5</b>	African / Black	isiZulu
<b>YA 6</b>	African / Black	isiZulu
<b>YA 7</b>	African / Black	isiXhosa
<b>YA 8</b>	African / Black	isiXhosa
<b>YA 9</b>	African / Black	isiXhosa
<b>YA 10</b>	African / Black	isiXhosa
<b>YA 11</b>	African / Black	Sepedi
<b>YA 12</b>	African / Black	Sepedi



<b>Young adults: Participants for focus groups</b>		
<b>Participant</b>	<b>Race</b>	<b>Language</b>
<b>YA 13</b>	African / Black	Setswana
<b>YA 14</b>	African / Black	Setswana
<b>YA 15</b>	African / Black	Sesotho
<b>YA 16</b>	African / Black	Sesotho
<b>YA 17</b>	African / Black	Xitsonga
<b>YA 18</b>	African / Black	SiSwati
<b>YA 19</b>	African / Black	Tshivenda
<b>YA 20</b>	African / Black	IsiNdebele
<b>YA 21</b>	African / Black	English
<b>YA 22</b>	Coloured	Afrikaans
<b>YA 23</b>	Coloured	Afrikaans
<b>YA 24</b>	Indian / Asian	English
<b>YA 25</b>	White	Afrikaans

The participants in Table 3.3 were invited for focus groups. Table 3.4 shows the participants who showed up for the focus groups.

**Table 3.4: Final participants of the focus groups: young adults**

<b>Young adults: Participants for focus groups</b>			
	<b>Participant</b>	<b>Race</b>	<b>Language</b>
<b>Focus group 1:</b>			
✓	YA 1	African / Black	isiZulu
✓	YA 2	African / Black	isiZulu

<b>Young adults: Participants for focus groups</b>			
	Participant	Race	Language
✓	YA 3	African / Black	isiZulu
✓	YA 4	African / Black	isiZulu
✓	YA 5	African / Black	isiZulu
✗	YA 6	African / Black	isiZulu
✓	YA 7	African / Black	isiXhosa
✓	YA 8	African / Black	isiXhosa
✓	YA 9	African / Black	isiXhosa
✗	YA 10	African / Black	isiXhosa
✓	YA 11	African / Black	Sepedi
✓	YA 12	African / Black	Sepedi
✓	YA 13	African / Black	Setswana
✓	YA 14	African / Black	Setswana
✓	YA 15	African / Black	Sesotho
✓	YA 16	African / Black	Sesotho
<b>Focus group 2:</b>			
✓	YA 17	African / Black	Xitsonga
✓	YA 18	African / Black	SiSwati
✓	YA 19	African / Black	Tshivenda
✓	YA 20	African / Black	IsiNdebele
✓	YA 21	African / Black	English
✓	YA 22	Coloured	Afrikaans
✓	YA 23	Coloured	Afrikaans
✓	YA 24	Indian / Asian	English

<b>Young adults: Participants for focus groups</b>			
	Participant	Race	Language
✓	YA 25	White	Afrikaans

In the focus group for the educational psychologists, I wanted professional opinions and insights expressed by educational psychologists and for them to share their expertise, experiences and opinions on the newly developed photo therapy tool. The following criteria were set for the educational psychologists' focus group.

Focus groups: educational psychologists

- Educational psychologists who are registered at the Health Professionals Council of South Africa (HPCSA)
- Educational psychologists who work (have experience) in multicultural therapy with clients
- Knowledge, interest and understanding of Jung and his symbols
- Knowledge, interest and understanding of expressive therapies
- Willingness on the side of the selected educational psychologist to participate in the study

Table 3.5 shows the participants who were invited for the focus groups.

**Table 3.5: Description of the participants of focus groups for educational psychologists**

<b>Educational psychologists: Participants for focus groups</b>				
<b>Participant</b>	<b>HPCSA-registered</b>	<b>Multicultural therapy</b>	<b>Jung &amp; symbols</b>	<b>Expressive therapies</b>
<b>EP 1</b>	✓	✓	✓	✓

<b>EP 2</b>	✓	✓	✓	✓
<b>EP 3</b>	✓	✓	✓	✓
<b>EP 4</b>	✓	✓	✓	✓
<b>EP 5</b>	✓	✓	✓	✓
<b>EP 6</b>	✓	✓	✓	✓
<b>EP 7</b>	✓	✓	✓	✓
<b>EP 8</b>	✓	✓	✓	✓
<b>EP 9</b>	✓	✓	✓	✓
<b>EP 10</b>	✓	✓	✓	✓

Table 3.6 illustrates the participants who showed up for the focus groups.

**Table 3.6: Final participants of the focus groups: Educational psychologists**

<b>Educational psychologists: Participants of focus groups</b>					
	<b>Participant</b>	<b>HPCSA-Registered</b>	<b>Multicultural therapy</b>	<b>Jung &amp; symbols</b>	<b>Expressive therapies</b>
<b>Focus group 1:</b>					
✓	EP 1	✓	✓	✓	✓
✓	EP 2	✓	✓	✓	✓
✓	EP 3	✓	✓	✓	✓
×	EP 4	✓	✓	✓	✓
✓	EP 5	✓	✓	✓	✓
<b>Focus group 2:</b>					
×	EP 6	✓	✓	✓	✓
×	EP 7	✓	✓	✓	✓
✓	EP 8	✓	✓	✓	✓

<b>Educational psychologists: Participants of focus groups</b>					
	<b>Participant</b>	<b>HPCSA-Registered</b>	<b>Multicultural therapy</b>	<b>Jung &amp; symbols</b>	<b>Expressive therapies</b>
✓	EP 9	✓	✓	✓	✓
×	EP 10	✓	✓	✓	✓

### **3.7 Focus group as data collection method**

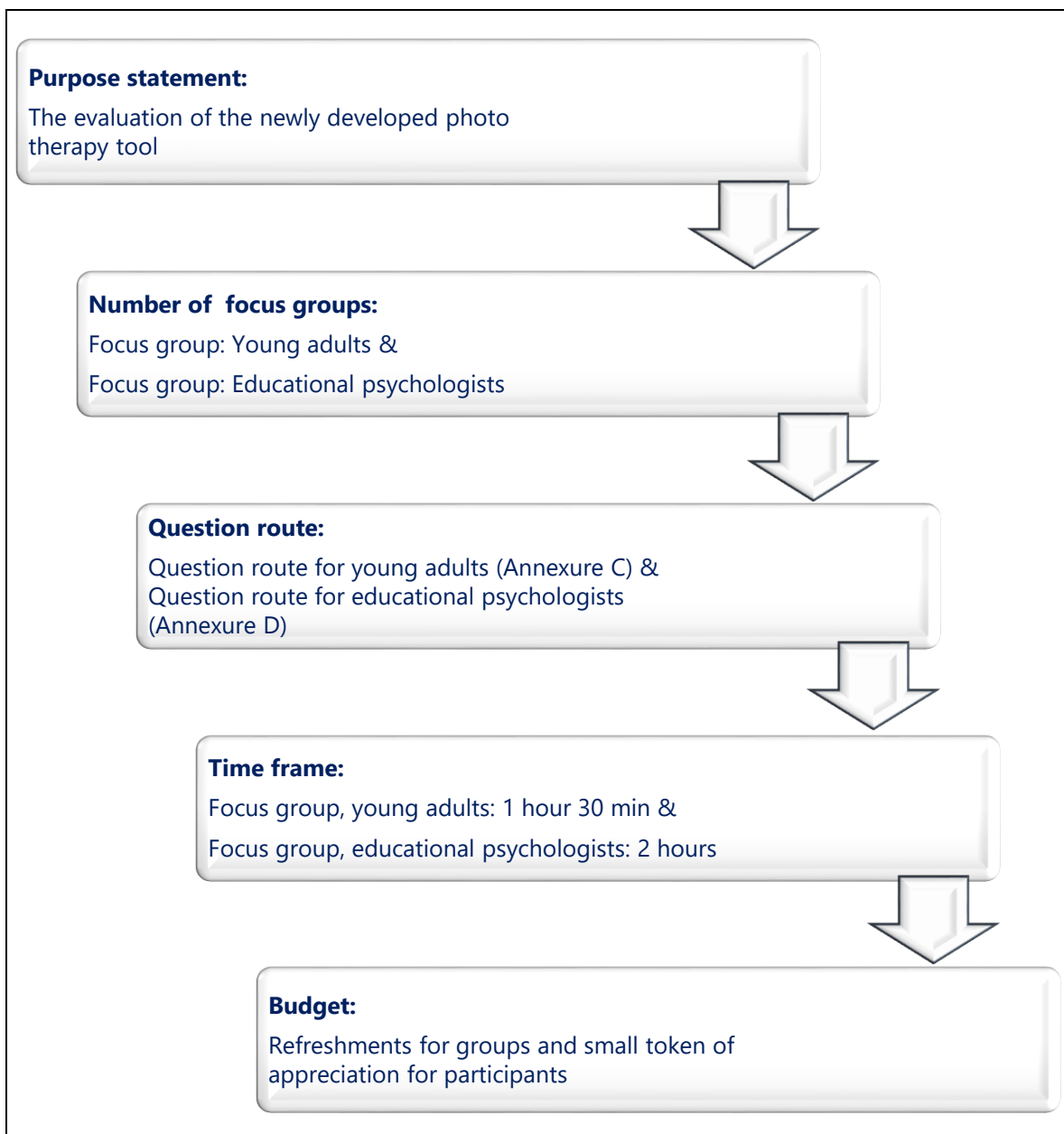
Focus groups are defined as interviews with people who are knowledgeable on the topic under study (Merriam & Tisdell, 2016:114). The focus group interview is a strategy based on the assumption that group interviews are more productive to broaden the responses of the participants; participants are more actively involved and assist in facilitating forgotten information (Nieuwenhuis, 2007:91).

This method was selected for this research, as I was seeking a discussion of the participants' ideas and their opinions on the newly developed photo therapy tool. I wanted to interview a purposefully sampled group of people to gain an enhanced understanding of a problem or an assessment of a problem, distress, idea or new product, as stated by McMillian and Schumacher (2011:455). The focus group design, according to Krueger and Casey (2009:378), is a wonderful method to gather information for formative and summative evaluation. The focus group can be used to understand how people feel about a product or service and to evaluate a programme and how the programme may be improved (Krueger & Casey, 2009:378).

The data were gathered from focus groups. For discussion of the newly developed photo therapy tool, the target groups were young adults and professional educational psychologists, as I wanted the input of both emerging adults on the design of the photo therapy tool and educational psychologists as the experts that would ultimately use the photo therapy tool in therapy with clients after the research process has been

completed. The photo therapy tool was presented to the participants. The moderator guided the discussion in an informal and welcoming way to obtain participants' opinions of the newly developed photo therapy tool (see Question Routes for the focus groups, Annexure C – Emerging adults, and Annexure D – Educational psychologists).

Diagram 3.3 sets out the plan for the focus groups of this research.



**Diagram 3.3: Plan for the focus groups of the research**

### **3.8 Characteristics of the focus group**

Kruger and Casey (2009:381-384) expound the characteristics of the focus group as follows. Focus groups entail focused discussions on the key aspects of a topic. Focus groups generate discussions between the participants to gather research data. The focus group needs not reach a conclusion; the aim is an in-depth discussion of the topic. The environment of the focus group is welcoming and non-threatening, so that participants can express their views and feelings in an open environment. Homogenous participants are selected, as they share an interest in the topic and a more open sharing of ideas and thoughts may occur. Four to 12 members are considered a reasonable size for a focus group. Smaller groups are recommended where the participants possess expertise and experience on the topic. As the aim of the focus group is the exploration of the topic, smaller groups result in a deeper exploration of the topic by the participants. Patterns and trends are explored across the groups. A skilful moderator guides the group so that a meaningful exploration of the topic can be achieved (Krueger & Casey, 2009:381-384).

The data from the focus groups were analysed, so that themes could be identified for the research.

### **3.9 Data analysis**

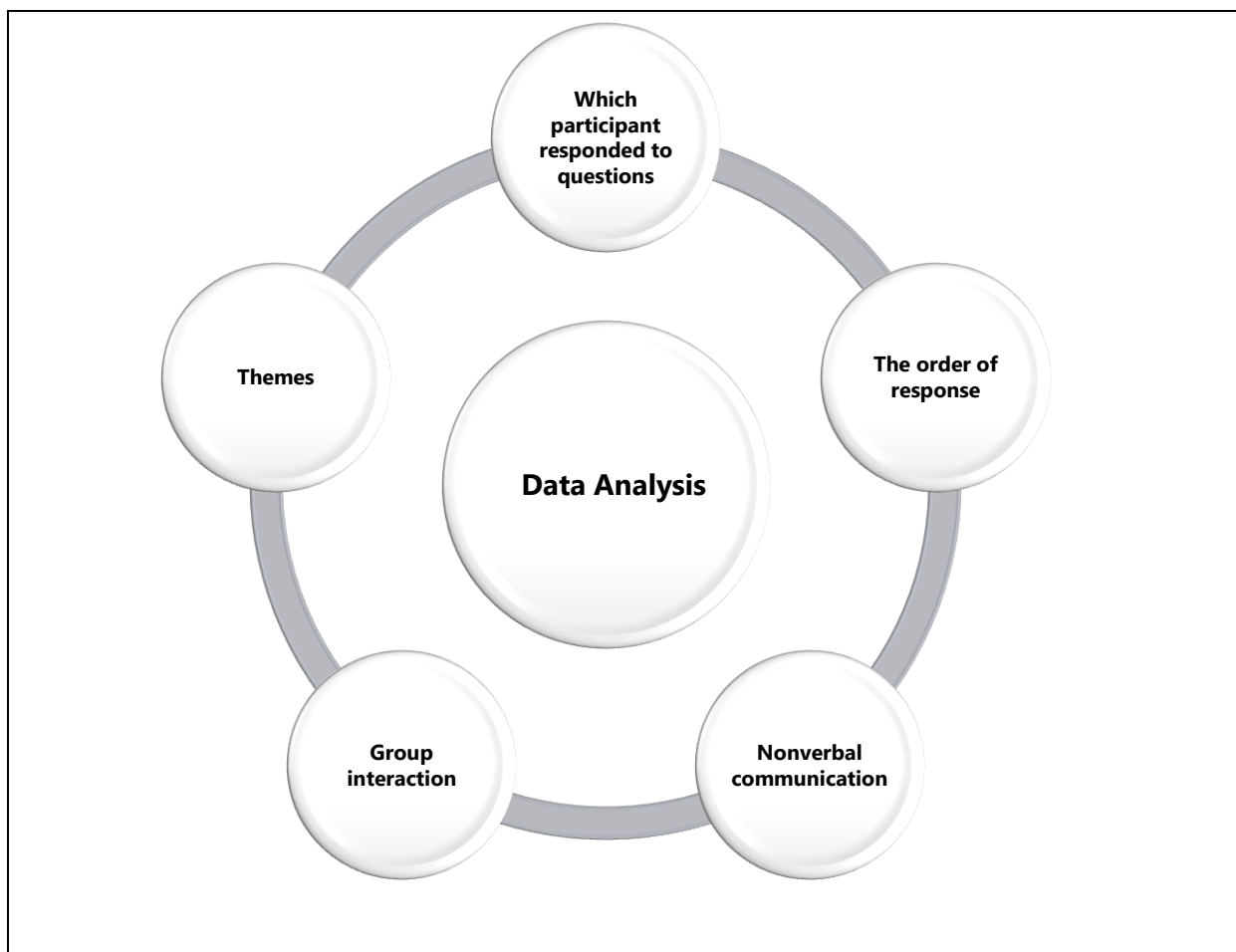
Merriam and Tisdell (2016: 202) define data analysis as "the process of making sense out of the data". Onwuegbuzie, Dickinson, Leech and Zoran (2010:247) indicate that the voice data source is the main focus of the focus group analysis. The micro-interlocutor analysis programme was used, as explained by Onwuegbuzie et al. (2009:13). They developed the new method of analysis to enhance the rigour of focus group research. This method focuses on analysing data in which participants have responded to questions. The order of the responses, nonverbal communications and the group interaction are considered in the analysis process (Onwuegbuzie et al., 2009:1).

After the completion of the focus groups, the sessions were transcribed. The recordings were repeatedly replayed to enable me to familiarise myself with the data.

The following points were considered in the analysis of the data:

- Participants' responses to questions
- The order of the responses
- Nonverbal communication
- Group interaction

The data were analysed according to themes to construct meaning from the data. Diagram 3.4 presents the data analysis process.



**Diagram 3.4: Data analysis process**



### 3.10 Trustworthiness

The following aspects of trustworthiness for constructivist qualitative research are postulated by Merriam and Tisdell (2016:241). **Internal validity or credibility**, according to Merriam and Tisdell (2016:244), involves that there are strategies a researcher can utilise to heighten the credibility of findings, as qualitative research cannot obtain an objective “truth or reality”. **Reliability or consistency** means that outsiders concur that, given the data collected, the results make sense – they are consistent and dependable (Merriam & Tisdell, 2016:251). **External validity** is the degree to which the conclusions of one study can be applied to other situations (Merriam & Tisdell, 2016:253). The strategies presented in Table 3.5 were used to enhance the transferability of the qualitative study.

**Table 3.7: Strategies to promote credibility and transferability, and strategies for this research (adapted from Merriam & Tisdell, 2016:259)**

<b>Strategies for promoting credibility, consistency and transferability</b>		
<b>Internal validity or credibility</b>	<b>Triangulation:</b> Use of multiple methods of data collection (Merriam & Tisdell, 2016:245).	In the development of the photo therapy tool, I gathered the opinions of experts (software developers, artists, colleagues and young adults) to obtain insight. I used qualitative data-gathering techniques of focus groups (young adults and educational psychologists) and the application of photographs to obtain data.

**Strategies for promoting credibility, consistency and transferability**

<b>Internal validity or credibility</b>	<p><b>Member check:</b> Seek feedback on preliminary or emerging findings from some of the participants interviewed (Merriam &amp; Tisdell, 2016:246).</p>	<p>I corroborated my findings by checking some of them with the participants. Where I was dubious of the meaning, these findings were authenticated by the participants.</p>
	<p><b>Adequate engagement in data collection:</b> Persistent repetition of the outcome and findings as more data are collected, until it becomes saturated, will result in no different or new information being collected (Merriam &amp; Tisdell, 2016:246-248).</p>	<p>I conducted several focus groups with the participants. In general the focus groups were positive about the photo therapy tool, but as the developmental intervention research design is a creative and interactive process, new suggestions would always be made by participants to be included. I felt that after the focus groups had indicated the tool reflected their life world and the South African context, the data became saturated.</p>

**Strategies for promoting credibility, consistency and transferability**

<p><b>Internal validity or credibility</b></p>	<p><b>Research position or reflexivity:</b></p> <p>Researchers need to illuminate their prejudices, dispositions and assumptions regarding the research. This assists in understanding how the individual researcher has reached the particular interpretation of the data (Merriam &amp; Tisdell, 2016:249).</p>	<p>As discussed in Chapter 1 Section 1.7, I declared my position and my frame of reference, thereby declaring that these aspects would influence my interpretation of the data collected, as well as the analysis process.</p>
<p><b>Reliability or consistency</b></p>	<p><b>Audit trail:</b></p> <p>Explain in detail how the data were collected, how categories were derived at and how decisions were made throughout the inquiry (Merriam &amp; Tisdell, 2016:252). A research journal or set of recorded memos of the process was suggested, reporting on one's</p>	<p>As the developmental intervention research design (see Sections 3.3 and 3.4) is an intricate process, I kept a research journal of the process. In Chapter 4 a detailed account of the process followed to develop the photo therapy tool, is given.</p>

<b>Strategies for promoting credibility, consistency and transferability</b>		
	reflections, one's questions and decisions made while collecting data (Merriam & Tisdell, 2016:253).	
<b>External validity or transferability</b>	<p><b>Rich, thick descriptions:</b></p> <p>Give an account of the setting and the participants of the study, as well as a detailed explanation of the findings, with suitable evidence presented in the form of quotes from interviews with the participants, field notes and documents (Merriam &amp; Tisdell, 2016:257).</p>	<p>The focus groups were conducted with a variety of participants. The analysis of the data is described in Chapter 5. A selection of quotes from the participants are presented as illustrations and descriptions.</p>
	<p><b>Maximum variation:</b></p> <p>Maximum alteration in the selection of the sample allows for the likelihood of a greater range of application</p>	<p>I tried to select emerging adult participants to present the diversity of the South African context, but as a qualitative study, a broad selection was</p>

**Strategies for promoting credibility, consistency and transferability**

	<p>(Merriam &amp; Tisdell, 2016:257).</p>	<p>not made. Therefore, generalisations cannot be made, but the participants' opinions were valuable in the development of the photo therapy tool.</p> <p>The educational psychologists' focus group was also a small sample. For this focus group, I was seeking experts in multicultural therapy and the use of creative therapies with clients. Hence, it is difficult to generalise the findings, but the qualitative analysis shows the possible usefulness of this photo therapy tool as a modern therapeutic tool.</p>
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### **3.11 Ethical considerations**

Connolly (2003:7) comments on the researcher's need to conduct research in a professional manner that is open, honest and objective. Ethical considerations in human science research are of the utmost importance. The following guidelines were followed to ensure ethical conduct in the research process.

#### **🕒 No harm**

It was important for the researcher to ensure that no psychical or psychological harm is inflicted on the participants of the study. Determining psychological risks is an important factor in any research study. Shaughnessy, Zechmeister and Zechmeister (2012:63) caution that a research must consider the specific population that is taking part in the study.

In order to deal with potential risks, I took into consideration the fact that the participants interacted in group settings within the focus group study. It was, therefore, important to have a discussion on the limits of confidentiality and risks associated with participating in a group. It was also important to remember that the aim of the focus groups was the evaluation of the photo therapy tool, and not individual therapy. My aim was to ensure that the participants did not disclose information that could be harmful to themselves or the other participants. Therefore, code numbers were given to participants in the study and no personal details were disclosed.

#### **🕒 Competence**

It is very important that psychologists understand and work within their scope of practice and take the guidelines of their competence into consideration. Evans and Rooney (2008:55) report on this aspect – "Psychologists provide services, teach, and conduct research with populations and in areas only within the boundaries of their competence, based on their education, training, supervised experience, consultation,

or professional experience.” This research was done after my master’s studies, when I had studied photo therapy in depth. I am a professional educational psychologist, registered at the Health Professional Council of South Africa, and I use photo therapy in my private practice with clients.

### **📍 Informed Consent**

Shaughnessy et al. (2012:67) state that informed consent is a person-voiced readiness to participate in research that is transparent on the nature of the research. The researcher has an ethical responsibility to inform participants what the research topic and details of the research are, and about any risks being involved, and to respect the rights of participants during the research process. The participants of this study were provided with all the relevant information, enabling them to make a decision on whether they wanted to participate in the study (see Consent Forms Annexures A – Young Adults, and B – Educational Psychologists).

### **📍 Autonomy and Respect for Participants**

The respect and confidentiality of participants necessitated an openness regarding the research aims, procedures and publication of the research findings. Koocher and Keith-Spiegel (2009:106) emphasise the importance of the clarification of professional responsibilities from the onset of the professional relationship, as well as focusing on the wellbeing of the most vulnerable party in the chain of the research. These aspects were explained to the participants of the study (see Annexures A and B). During my study, I assigned a number to each participant and explained that participation was voluntarily and that they were free to withdraw from the study at any time.

## **3.12 Summary**

This chapter discussed the method that was employed to research the topic and to reach the aims of the study, namely the development and design of a photo therapy

tool. The theoretical framework, the selection of the sample, the data collection methods and the ethical procedures were discussed in the construction of the research. The developmental intervention research design was also discussed. In Chapter 4, the practical research process is elaborated on to assist in the credibility and transferability of the research.



**CHAPTER 4: THE INTERVENTION  
DEVELOPMENTAL DESIGN PROCESS**

**4.1 Introduction**

**4.2 Steps in the developmental intervention research**

**4.3 Process in the developmental intervention research  
design for this study**

**4.4 Step 1: Developmental phase for the photo therapy tool**

**4.5 Step 2: Design phase for the photo therapy tool**

**4.6 Step 3: Assessment phase**

**4.7 Step 4: Dissemination phase**

**4.8 Summary**

**Diagram 4.1: Overview of Chapter 4**

## CHAPTER 4: THE INTERVENTION DEVELOPMENTAL DESIGN PROCESS

*“Design and Development is composed of several parts, which, although, we present in linear fashion, may be better visualized as a series of activities that loop back to previous activities, as a spiral that evolves over time” (Gilgun & Sands, 2012:350)*

### 4.1 Introduction

The developmental intervention research design that guided the research, needed to follow certain steps in the development of the new intervention. Hence, for practical reasons, Chapter 4 discusses in detail the process that was followed in the development of this new photo therapy tool, as part of the research journal (see Chapter 3, Section 3.10) to promote the trustworthiness of the research.

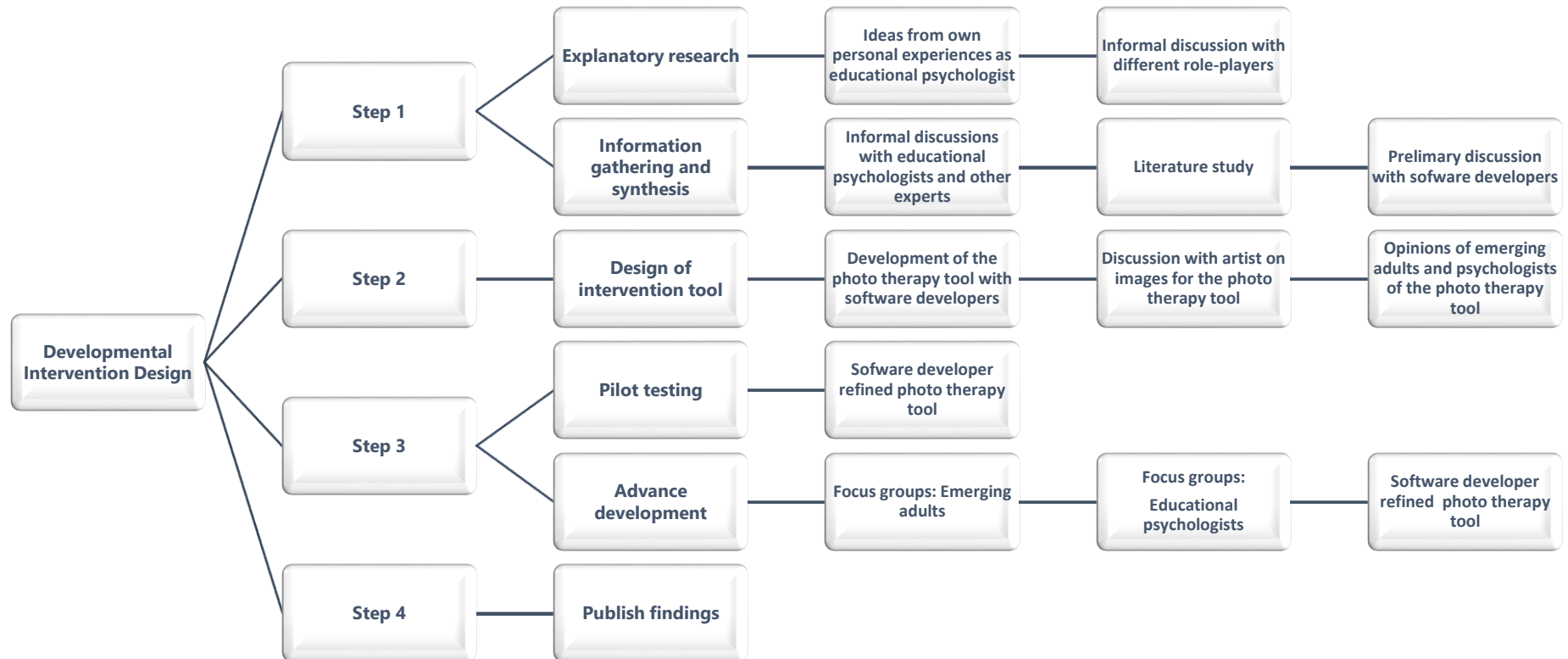
### 4.2 Steps in the developmental intervention research

In Chapter 3, Section 3.4, the steps in developmental intervention research were discussed. These steps guided the process to develop the new photo therapy tool. These steps are presented in a linear format, but in practice this process is more circular in nature, where the developer continuously develops the tool.



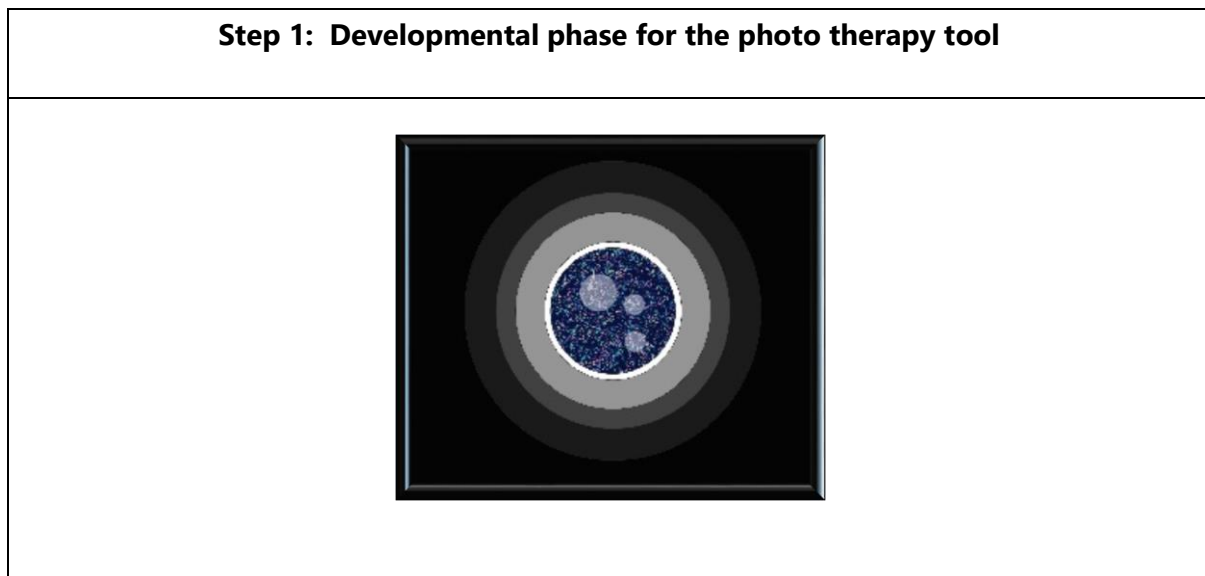
**Diagram 4.2: Steps in developmental intervention research**

Diagram 4.3 illustrates the process in the development of the photo therapy tool for this research.



**Diagram 4.3: Process in the developmental intervention research design for this study**

#### 4.4 Step 1: Developmental phase for the photo therapy tool



##### ■ Explanatory research

As previously mentioned in Chapter 1, Section 1.3, I completed my master's studies on photo therapy and found the expressiveness of this therapy of value. The relaxed way in which persons capture photographs of themselves and their life world makes it a non-threatening tool to use in therapy with clients. The research in my master's study focused on the use of photo therapy with adolescents' development of self-concept. In that research, I realised the wonderful poignancy of photo therapy, as well as the cultural sensitivity of photographs as therapeutic tools. I therefore contemplated developing a photo therapy tool that can be used in the South African multicultural setting. In my own private practice, I further explored the use of photo therapy with a variety of clients. In this process, the clients increasingly brought photographs on their electronic devices. As a result, I started to ponder on an electronic programme that can be used in therapy with clients.

In this exploration, I talked to a variety of people – psychologists, artists and the younger generation – about photographs. This guided the process to further explore

the idea of the development of an electronic photo therapy tool. I also spoke informally to software developers about the idea of the development of a programme where clients can load photographs as an interactive process for both clients and educational psychologists in a therapeutic process.

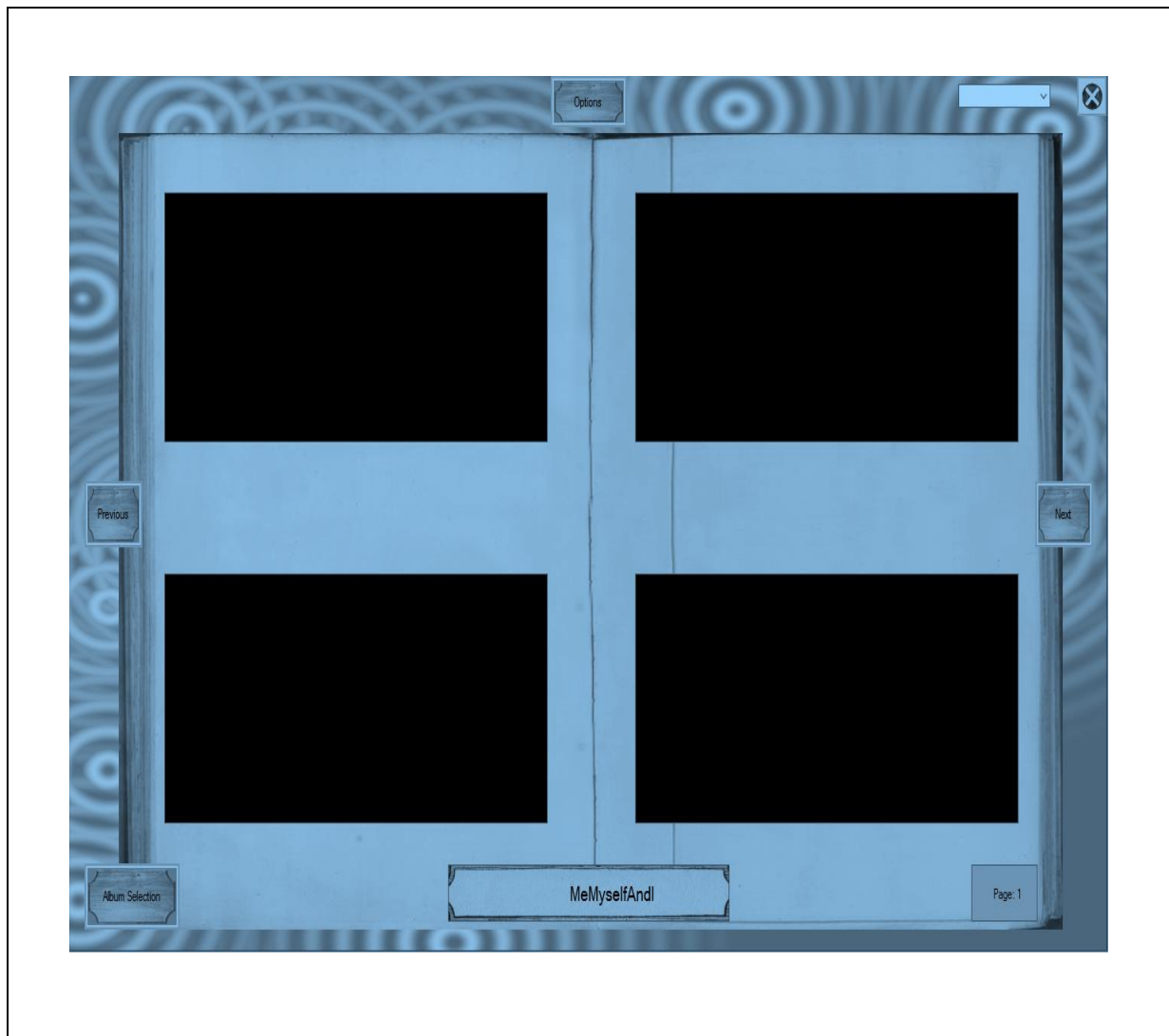
### ■ Information gathering and synthesis

The literature study revealed that pioneers in the field of photo therapy (Berman, 1993; Fryrear, 1980; Hogan, 1981; Krauss, 1980; Weiser, 1993; Stewart, 1979; Wheeler, 1992) showed the importance of photo therapy with clients in therapy. The Walker Visuals, developed by Joe Walker, and the Spectro Cards developed by Ulla Halkola, as well as other photo therapy applications were discussed (see Chapter 2, Section 2.7). These programmes were developed in photo therapy to make use of photographs to assist in evoking emotions and to further assist clients in therapeutic settings. These tools and programmes are being used in the photo therapy field, and they formed the basis for the development of the photo therapy tool.

The South African milieu is multicultural and I wanted to develop a programme for this specific need. I felt it necessary to develop a workable programme for the multicultural community, as well as a programme that is easy and practical to implement in diverse settings. In this process, I spoke informally to educational psychologists on their feelings about therapeutic tools and working in a multicultural setting with clients. These conversations led to a clear understanding that there is a need for tools that consider the new generation of clients. I then considered using an electronic application for the new generation. The processes to follow in developing an electronic tool for photo therapy was considered. I thereafter consulted with software developers to establish the feasibility of developing a photo therapy tool to be utilised in an interactive electronic programme. In this process, the basics of the software programme were designed and conceptualised. The new photo therapy tool considered the five techniques of photo therapy, as explained in Chapter 2, Section

2.7. In order to incorporate these aspects in the format for young adults the following electronic albums were created, based on Judy Weiser's five techniques:

- Material for projection changed to 'Cava' (meaning 'to see to look, to understand').
- Family photographs changed to 'My Boo, My Peeps & My People'.
- Photographs of the client as subject changed to 'Me, Myself and I'.
- Photographs by the client changed to 'My Stuff'.
- Self-portraits changed to 'Selfies'.



**Diagram 4.4: An example of photo album of the photo therapy tool**

Clients can download photographs and personalise the pages with colour, themes, stamps and words.

The Cava-projection photo album was based on the features of emerging adulthood (Anette, 2007:69), as explained in Chapter 2, Section 2.4. The photographs were created from my own photographic collections in an attempt to present features of young adults in their developmental phase.

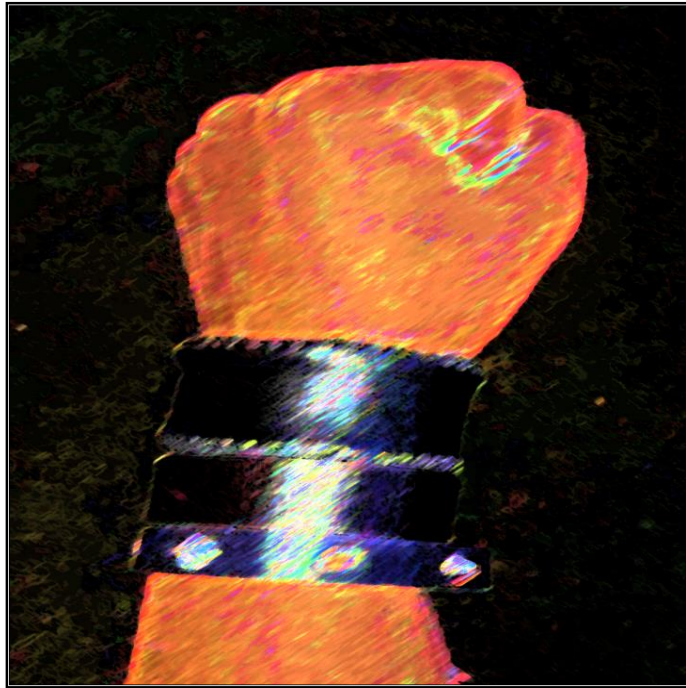
### Cava-Projection Photo Album Examples

#### Identity exploration



**Cava-Projection Photo Album Examples**

**Instability**



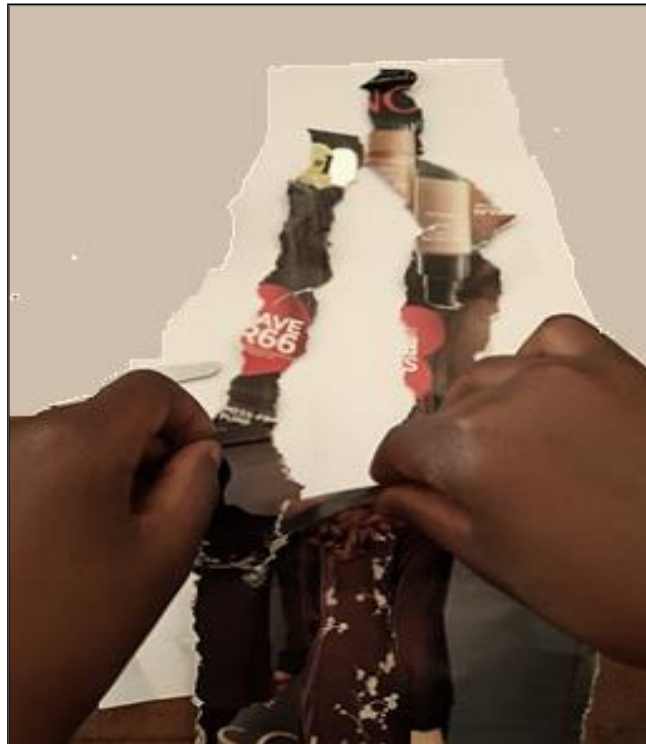
**Self-focused**



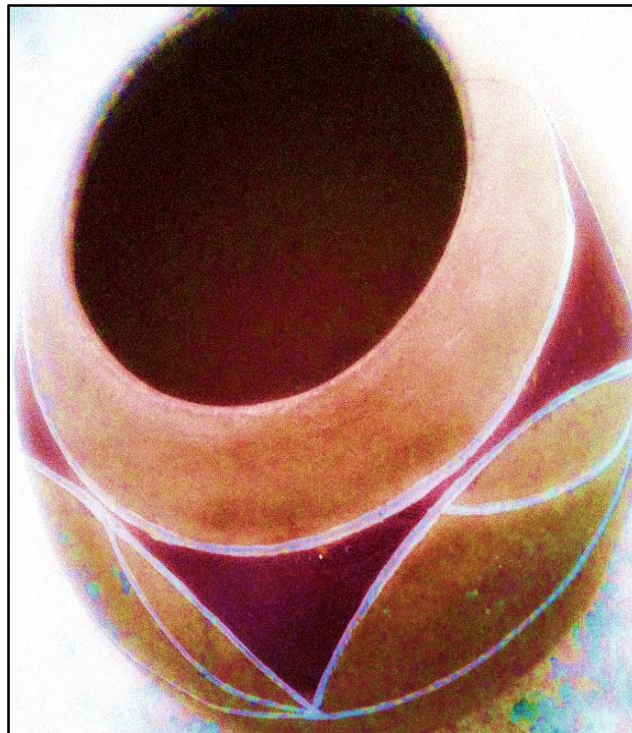


**Cava-Projection Photo Album Examples**

**Feeling in-between**



**Possibilities**

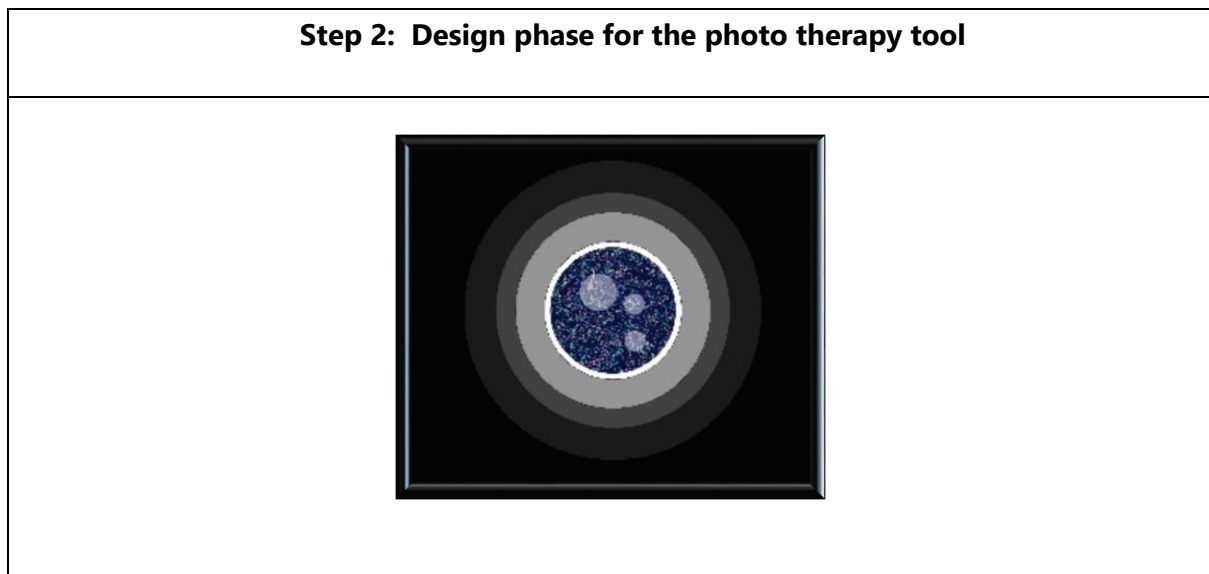


**Diagram 4.5: Examples of photographs in the Cava-projection photo album**

The photo therapy tool target group consisted of educational psychologists for therapy work in their scope of practice, as defined by the Health Professionals Council of South Africa.

The programme was developed to attempt including our multicultural society. In this study, the literature study in Chapter 2 assisted in the gathering of information and guidance in the development of a photo therapy tool. By conducting the literature study in the utilisation of photo therapy, I came to and understanding of the diverse aspects of photo therapy in a counselling setting. The literature review guided the development of the photo therapy tool.

#### **4.5 Step 2: Design phase for the photo therapy tool**



##### **🔗 Design of the intervention tool**

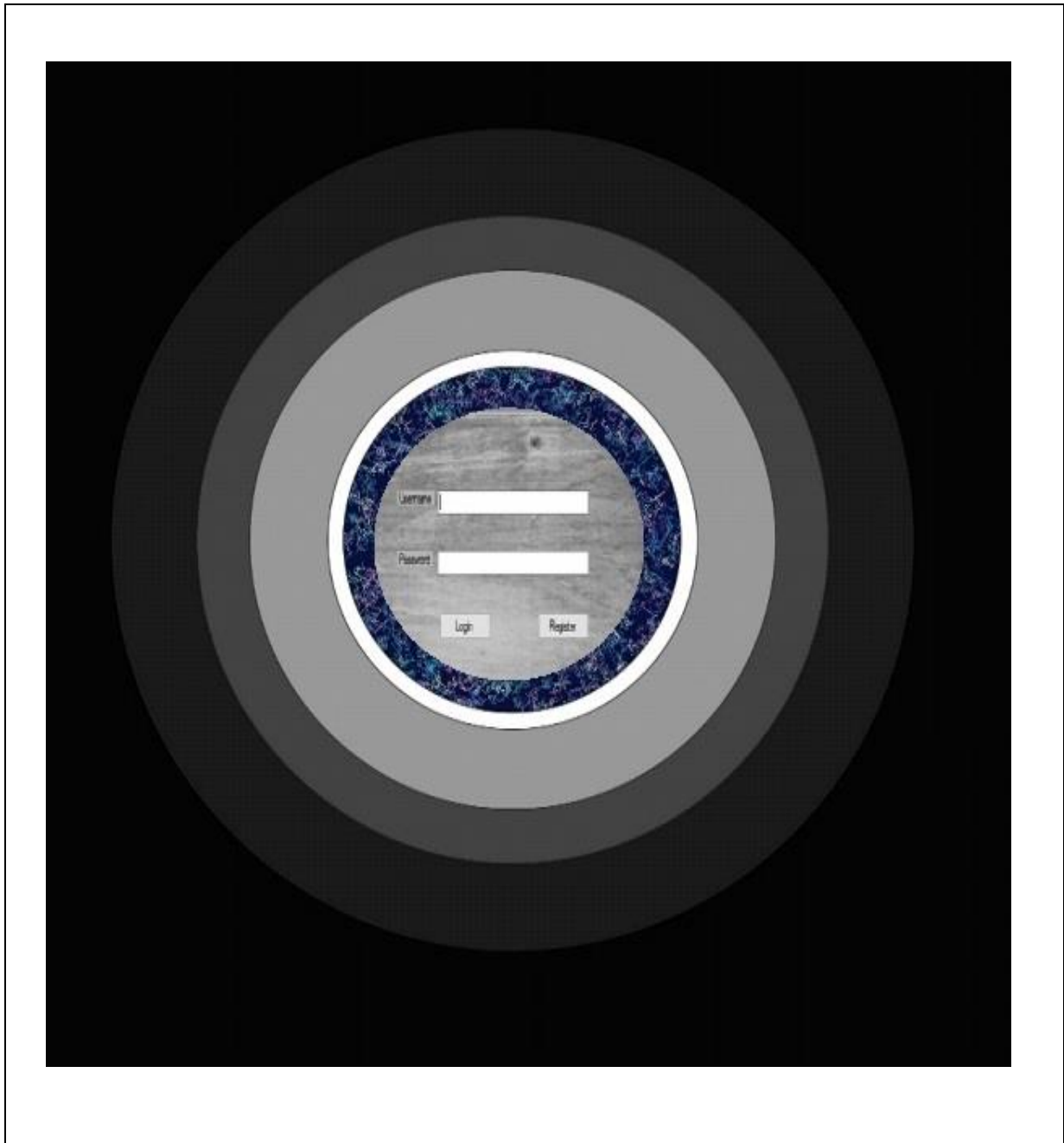
The next step was the design of the new photo therapy tool. To develop the new photo therapy tool, a specific practice model was developed to accommodate different role-players.

- 📍 Activities: Photographs being taken, photographs old and new downloaded and used in the photo therapy tool in the different albums.
- 📍 Location: In educational psychologists' practices with clients, after the research process has been concluded.
- 📍 Circumstances: The tool focuses on young adults in a therapeutic setting.
- 📍 Implementation: Educational psychologists in therapy with clients after the conclusion of the research process.

The design of the photo therapy tool was guided by the literature study, as well as my own personal experiences with photo therapy. The tool took into consideration the theoretical paradigm, as discussed in Chapter 1, Section 1.7, and the literature review in Chapter 2. As discussed, it is important to use tools that are relatable in therapy sessions. It came to light that the use of computerised programmes with digital photos was ideal to make the tool user-friendly to the target market. The photo therapy tool was developed with the young adults' life world as main focus point. The tool was developed together with software specialists.

The following aspects were designed for the photo therapy tool, with the target of the users' life worlds in mind.

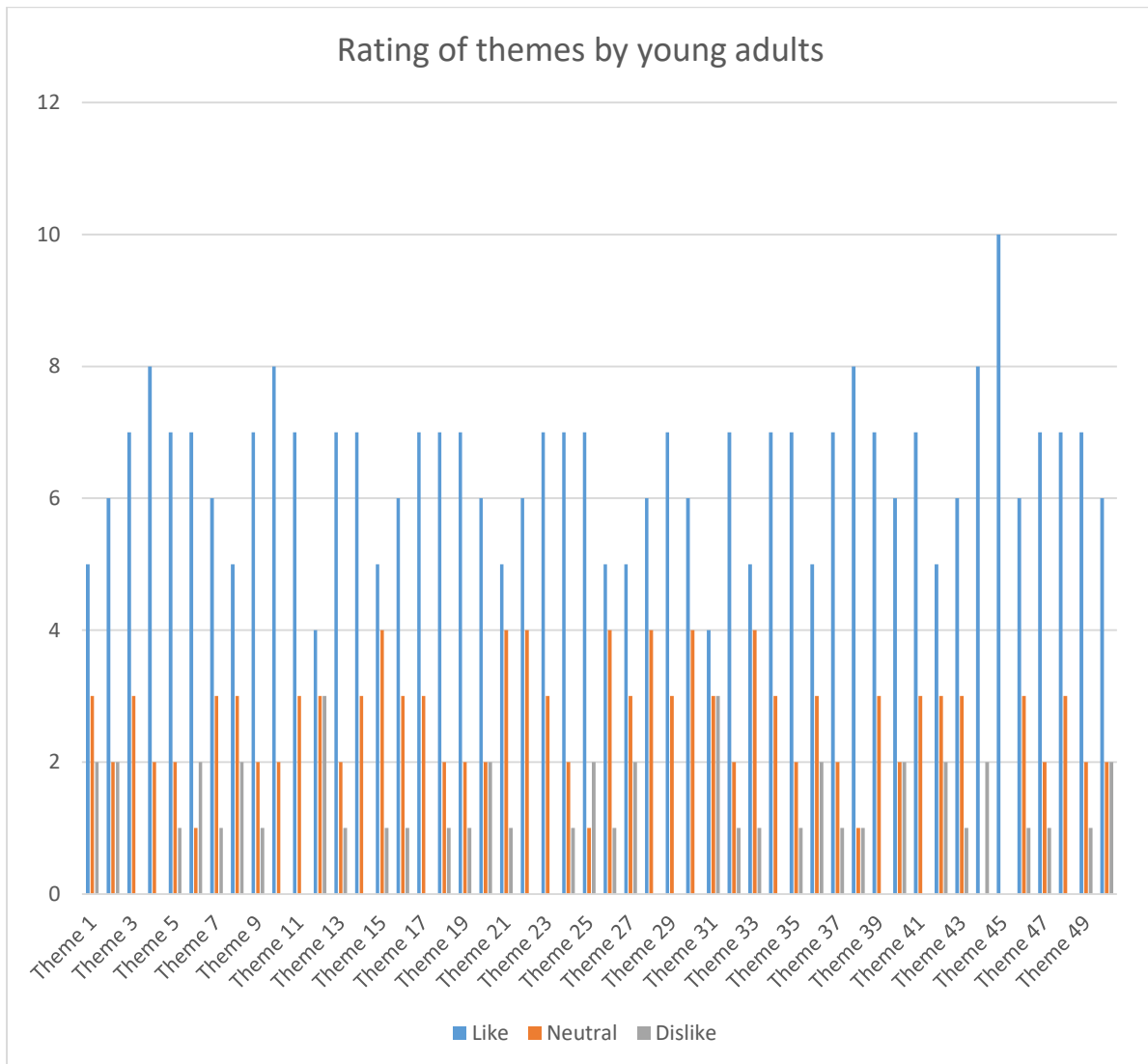
The Login Page (the first page of the electronic photo therapy tool), where clients will log in to create their own photo therapy tool, was developed.



**Diagram 4.6: Login page for photo therapy tool**

After the Login Page, the Title Page was developed. I then considered that this Title Page (the first page that opens after your login) needs to be personalised by the young adults, for example, giving it a title, as well as choosing a theme that represents their personal Title Page. Themes were created to present the background images the young adults would choose to present themselves and personalise their pages. These themes were designed by an artist and me, after informal discussions with young

adults on what aspects were important to them. These themes were presented to young adults in their life world to determine the suitability of the themes. Ten young adults rated the themes for the photo therapy tool. These young adults rated the 50 themes, and the suggestions and gaps were developed to be included in the photo therapy tool. In the final photo therapy tool, 100 themes were created.



**Graph 4.1: Rating by emerging adults on the themes for the photo therapy tool**

Diagram 4.7 indicates the top three themes, as selected by the young adults.

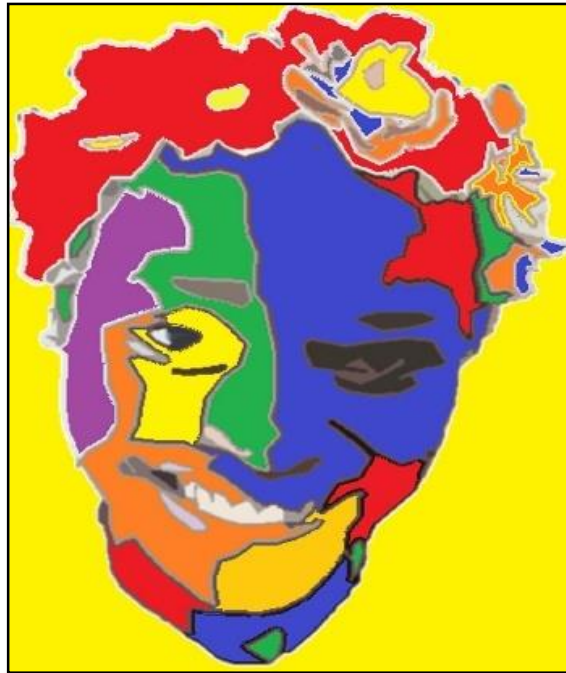
Photo therapy tool theme 46



Photo therapy tool theme 39



Photo therapy theme 45



**Diagram 4.7: The top three images as selected by emerging adults in the design phase**

The following diagram provides examples of some of the themes that were suggested by the young adults to be included in the themes for the photo therapy tool.

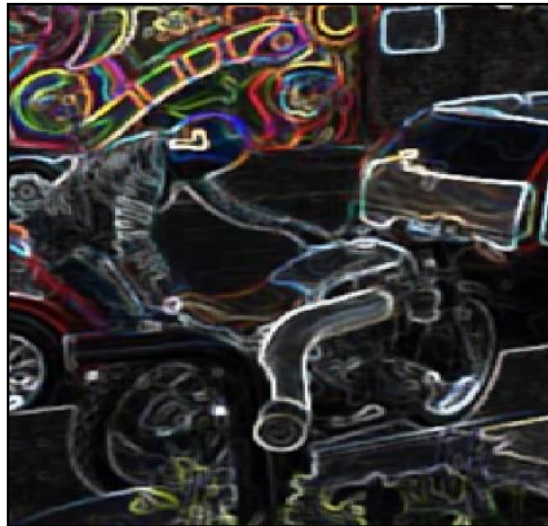
Including themes with the use of technology





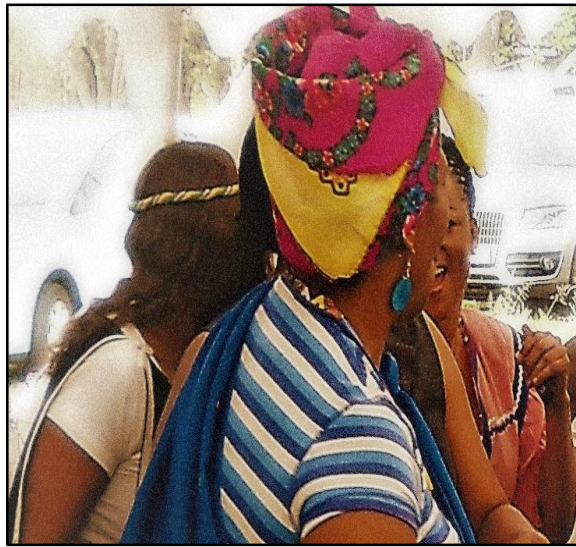


Including themes of motorbikes and motorcars





Including themes of people together in a social environment

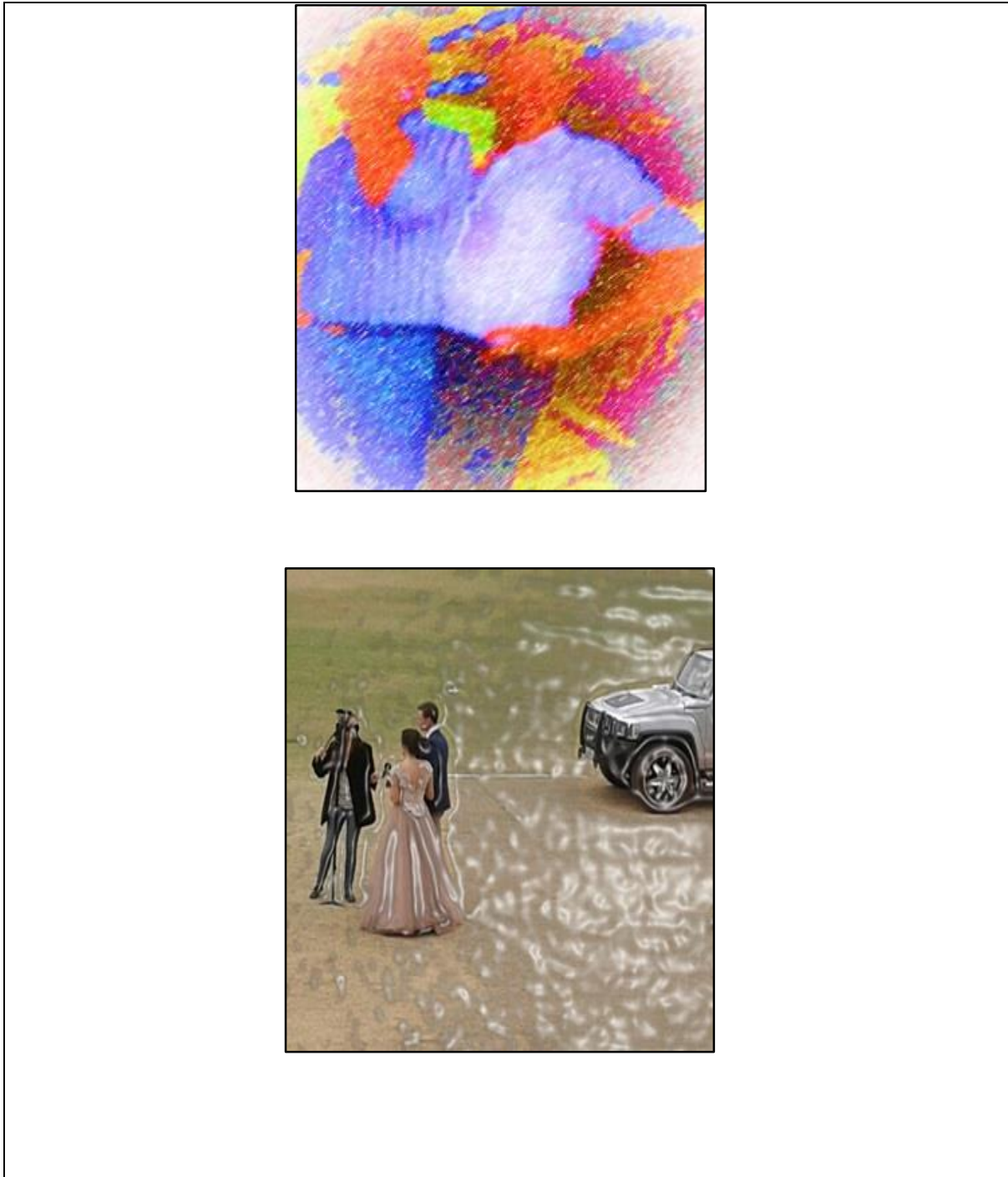






Including themes of relationships





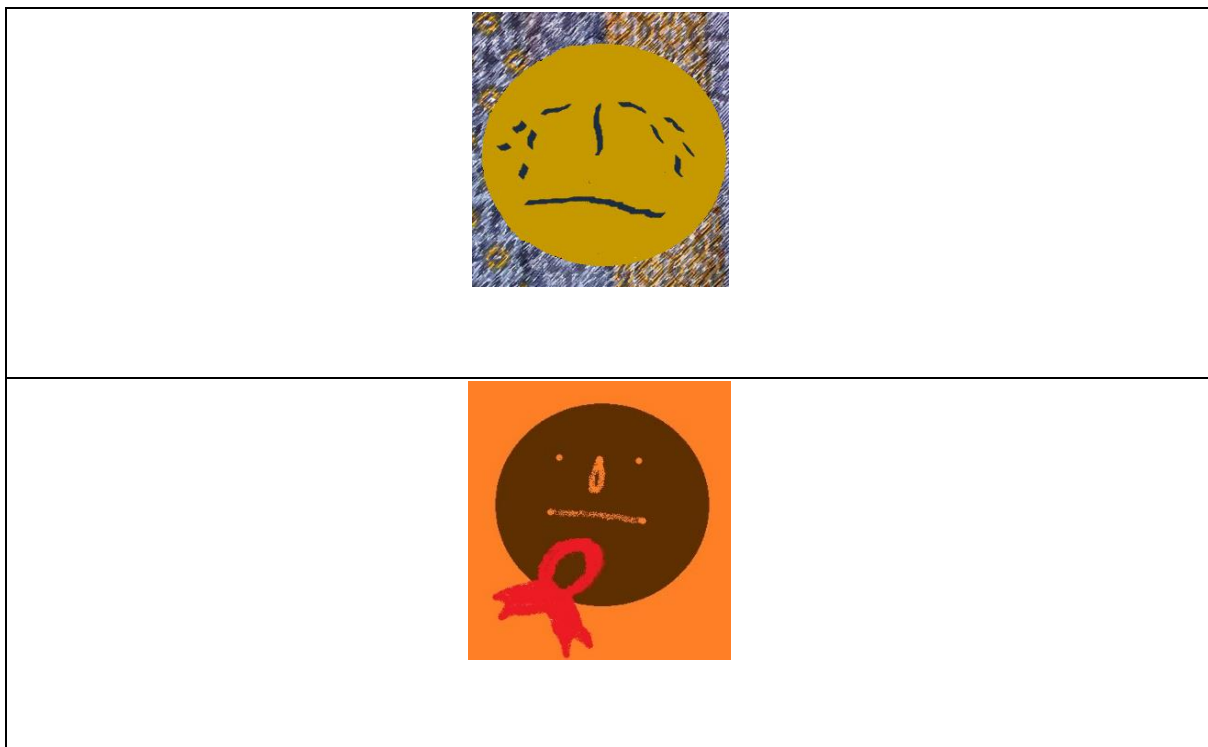
**Diagram 4.8: Suggested themes from young adults to be included in the design phase**

These groups also related to the stamps that would be used to further emphasise the photograph albums. The following stamps were selected as the top three stamps.



**Diagram 4.9: The top three stamps as selected by the young adults**

Examples of some of the stamps the young adults suggested should be included for use of emotions.







**Diagram 4.10: Suggested stamps from young adults to be included in the design phase**

The young adults evaluated the words to be used in the photograph albums. These words can be used to emphasise certain aspects in albums. The following words were the top three words selected by the young adults.





*Used as an expression of surprise or a curse – 'Jou bliksem!' (You bastard!)*



*An expression of appreciation or admiration, similar to 'nice'*

**Diagram 4.11: The top three words as selected by the young adults**

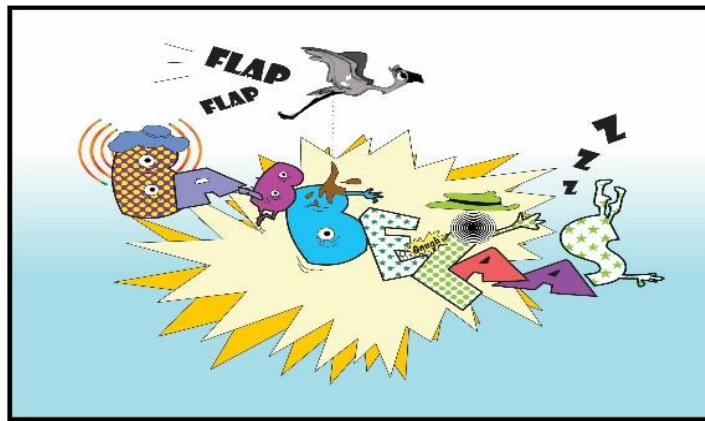
The following words were suggested examples of those chosen by the young adults to be incorporated into the photo therapy tool.



*Alternative word for 'cool'*



*Wow!*

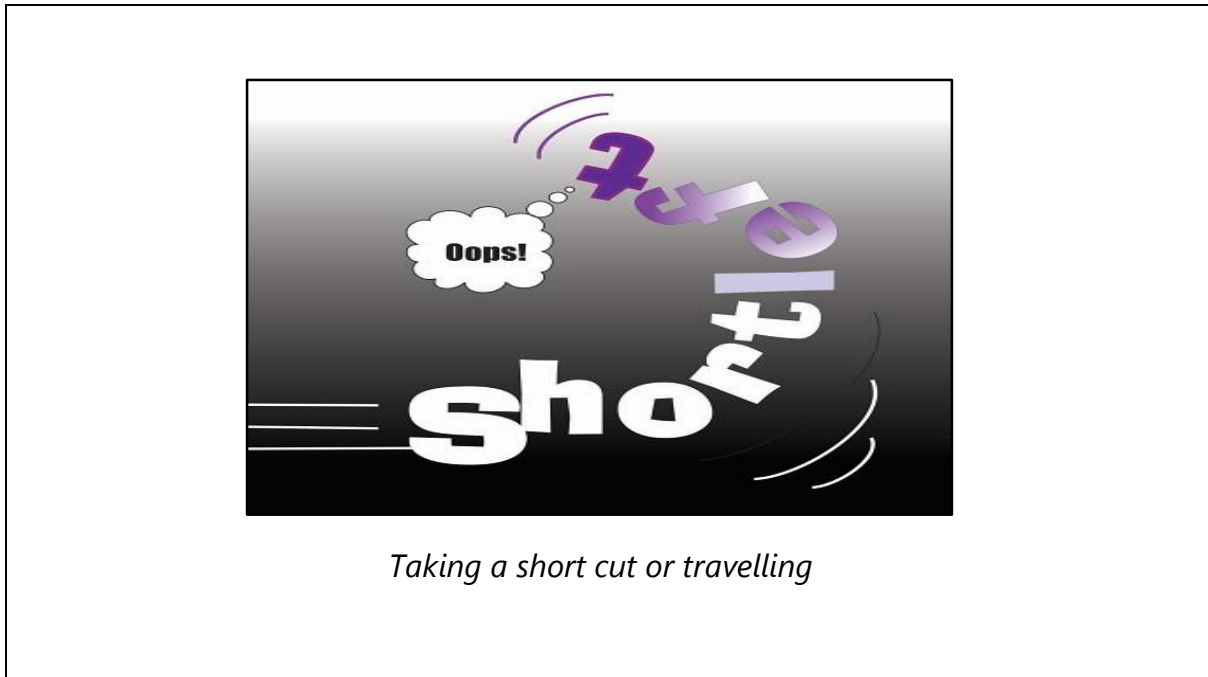


*Hangover*



*Comic style words*





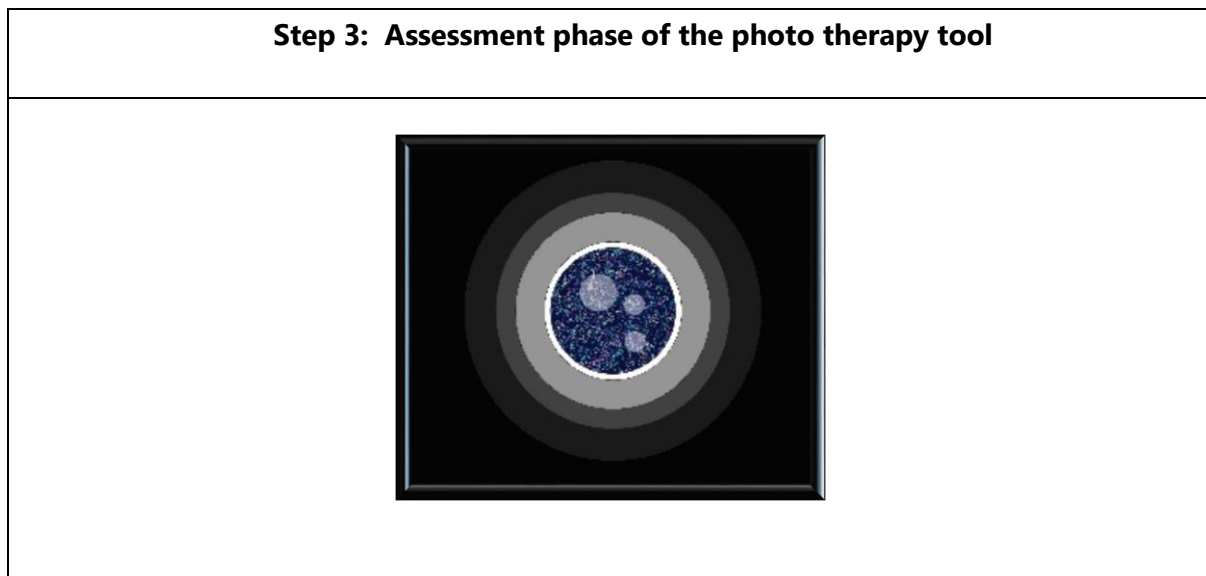
*Taking a short cut or travelling*

**Diagram 4.12: Samples selected by the young adults to incorporate into the tool**

#### 🔍 Evaluation of the design

The first draft of the photo therapy tool was developed and submitted for expert review. The purpose of the submission for expert review was to establish if the tool was practical and implementable. I selected two professional educational psychologists to discuss possible issues, practical implications and professional advice on the newly developed photo therapy tool. As the new photo therapy tool was for young adults to be utilised with educational psychologists in therapy, I also presented the tool to two young adults for their input and opinions. The comments of the educational psychologists, as well as those of the young adults were considered and incorporated into the final photo therapy tool. The final photo therapy tool was subsequently developed. The next step was the assessment of the new photo therapy tool.

#### 4.6 Step 3: Assessment phase



The aim of this step was to determine the practicality of the new photo therapy tool and to sort out problems with the implementation thereof – problems that might come to the fore when using the therapy tool and further information that should be included. The information obtained from the pilot test was included and the necessary adjustments made to the final tool.

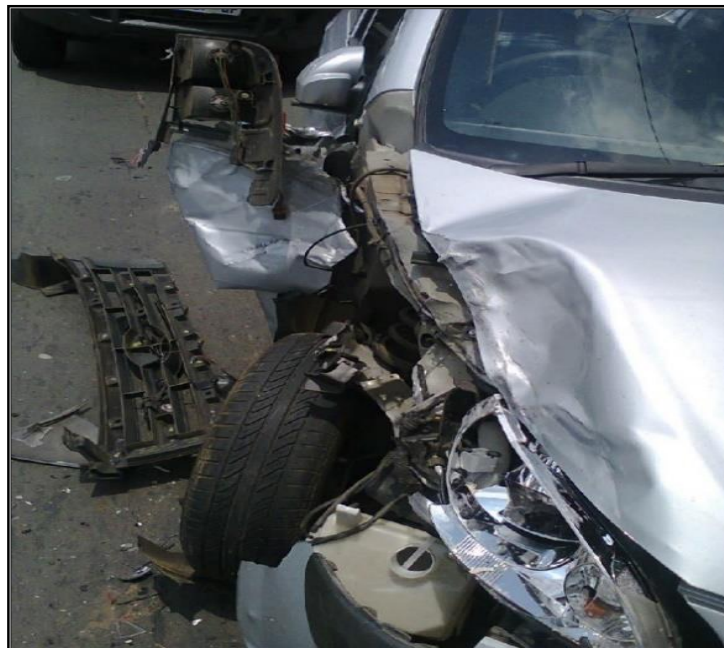
##### **■ Pilot testing**

It was important to test the photo therapy tool beforehand to establish execution issues. The pilot testing was done with two educational psychologists to establish whether the implementation of the tool was effective and whether the procedures were clear. This was done to test the photo therapy tool in real-life situations and to establish whether it was a workable tool for educational psychologists.

The opinions of the educational psychologists were incorporated into the photo therapy tool. Some of the aspects suggested by the educational psychologists were to include photographs in the projection page (Cava), to include more photographs

on problematic relationships, as well as art photographs and nature photographs, so that different meanings could be projected onto the tool.

Example of photographs on problematic situations as suggested by the educational psychologists



Example of photographs on art, photographs that different meanings can be projected to



Example of photographs on traditional homesteads and shacks as suggested by the educational psychologists







**Diagram 4.13: Some of the photographs suggested by the educational psychologists to be included in the photo therapy tool**

The educational psychologists also suggested a greater variety of emotional words, and not just slang words.





**Diagram 4.14: Some of the words suggested by the educational psychologists to be included in the photo therapy tool**

**🔍 Advance development**

It was important to evaluate the photo therapy tool that was developed, and to evaluate whether or not the photo therapy tool was useful in a therapeutic setting. It was important to get the perspective of educational psychologists as the users of the photo therapy tool, as well as the young adults that would experience the use of the tool. In order to obtain rich data to ultimately see if this photo therapy tool would be useful in a therapeutic setting, focus groups were chosen to obtain data, as discussed in Chapter 3, Section 3.7, on the perspectives of the users of the tool.

### ■ **Focus groups: developing a question route for the focus groups**

Krueger and Casey (2009:387) mention that when questions for the focus groups are developed, questions that address the purpose of the focus group, as well as the use of language that is clearly understood by the participants should be considered.

### ■ **Question route for focus groups: young adults**

The participants were introduced to the electronic photo therapy tool. The rationale of the photo therapy tool was explained, the concept of photo therapy briefly explained and, thereafter, the photo therapy tool was introduced. The Login Page, Title Page, Albums and the Projective Pages were shown, so that the young adults understood the photo therapy tool. Their opinions and perspectives were sought on the themes, stamps, words and projective photographs. The questions formed part of the question route, as the young adults discussed the look and feel of the photo therapy tool.

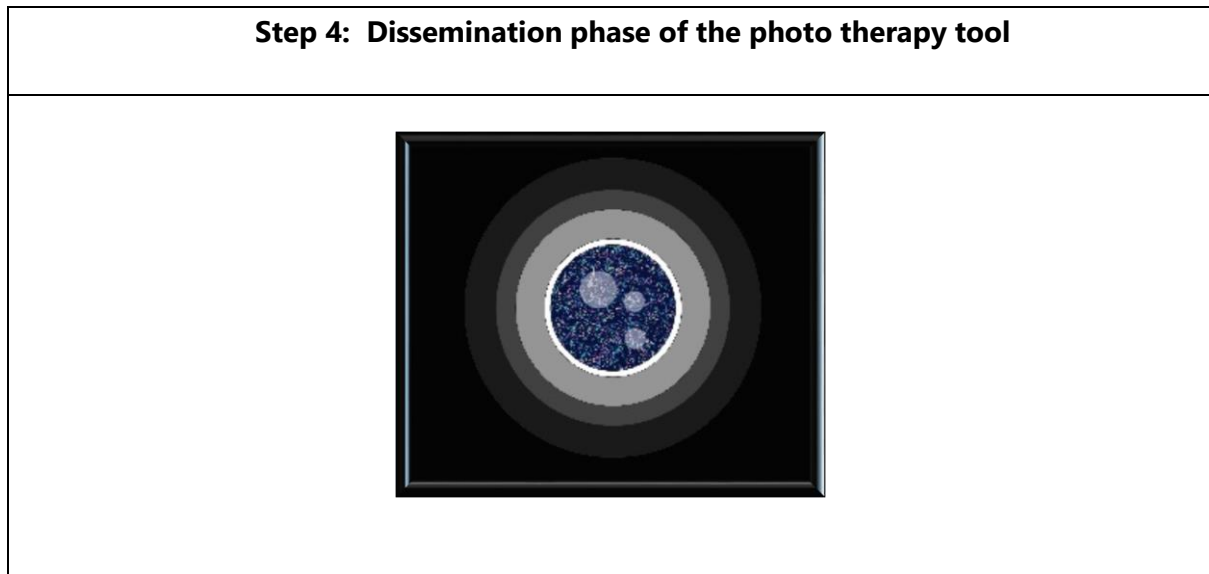
### ■ **Question route for focus groups: educational psychologists**

The participants were introduced to the electronic photo therapy tool. The rationale of the photo therapy tool was explained, the concept of photo therapy briefly explained and, thereafter, the photo therapy tool was introduced. The Login Page, Title Page, Albums and the Projective Pages were shown, so that educational psychologist understood the photo therapy tool. Their opinions and perspectives were sought on the themes, stamps, words and projective photographs. The questions formed part of the question route, as the educational psychologists discussed the look and feel of the photo therapy tool.

These focus groups were established to obtain the perspective of the participants of the study. The findings of the focus groups are discussed in detail in Chapter 5.



#### 4.7 Step 4: Dissemination phase



During this phase, the data were analysed and the dissertation was completed to report on the findings of the newly developed photo therapy tool.

#### 4.8 Summary

In this chapter I recounted a description of the developmental intervention design of my study. The practical steps in the development process were expanded in order to make the process more clear-cut. In Chapter 5, the analysis of the focus group is discussed in depth.

<b>CHAPTER 5: ANALYSIS OF THE DATA</b>
5.1 Introduction
5.2. Method of data analysis
5.3 Discussion of analysis
5.3.1 Title page and themes of photo therapy tool: Young adults
5.3.2 Stamps of photo therapy tool: Young adults
5.3.3 Words of photo therapy tool: Young adults
5.3.4 Photo albums of photo therapy tool: Young adults
5.3.5 Projective albums of photo therapy tool: Young adults
5.3.6 What did you like about the photo therapy tool?
5.3.7 What didn't you like about the photo therapy tool?
5.3.8 Does it take your life world into consideration (young adults?)
5.3.9 Do you think the photo therapy tool is race-, religion- and culture-friendly? Does it reflect the South African context?
5.3.10 Would you like to use the photo therapy tool with a psychologist in therapy?
5.3.11 One last thing you want to say about the photo therapy tool?
5.3.12 Summary of the themes resulting from the young adults' focus groups - photo therapy tool
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5.3.17 Projection of the photo therapy tool: Educational psychologists
5.3.18 What did you not like about the photo therapy tool?
5.3.19 What didn't you like about the photo therapy tool?
5.3.20 Do you think this considered how young adults experience their life world? Do you think they could see themselves in this?
5.3.21 Is the photo therapy tool race-, ethics- and culture-friendly? Does it reflect our South African context?
5.3.22 Would you like to use the photo therapy tool with your clients, young adults, in therapy?
5.3.23 One last thing you want to say about the photo therapy tool?
5.3.24 Summary of the themes resulting from the educational psychologists' focus groups - photo therapy tool
5.4 Summary of themes
5.5 Summary

**Diagram 5.1: Overview of Chapter 5**

## CHAPTER 5: ANALYSIS OF THE DATA

*"Data analysis is the systematic search for meaning" (Feza, 2015:460)*

### 5.1 Introduction

In the preceding chapter, I considered the specific research process of developmental intervention to present a detailed description of the process and also present an audit trail of the experiences of the study. In this chapter, I report the results of the study in terms of the themes that transpired from the data analysis. Nieuwenhuis (2007:99) outlines that data analysis is a continuing and interactive process, which implies that data gathering, processing, analysis and reporting are all connected to one another and not just a number of sequential steps. I will use the participants' direct quotations from the focus groups.

### 5.2 Data analysis

Merriam and Tisdell (2016:201) indicate that data analysis "is primarily inductive and comparative". In the process of understanding the data collected, as discussed in Chapter 3, Section 3.9, I used micro-interlocutor analysis, as proposed by Onwuegbuzie et al. (2010:247).

The focus group discussions for young adults were generally well planned and as moderator I tried to create an atmosphere where the participants felt welcomed and that they could open up and share their experiences. The purpose, aims, informed consent and confidentiality agreement were discussed at the beginning of the focus groups (see Annexures A and B). In the young adults' focus groups, the participants did not feel comfortable at the start, until they were welcomed and the purpose was addressed; thereafter they relaxed and shared their opinions. I set up the focus groups so that participants could see and respond to one another in the process of viewing the photo therapy tool. As with group interaction, in both the focus groups of the

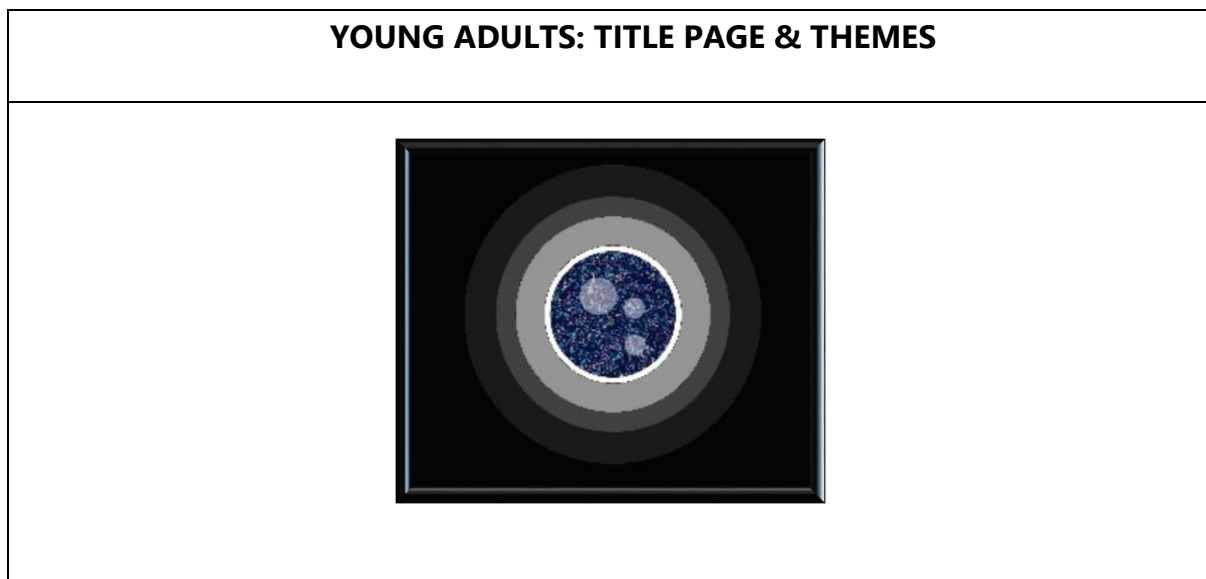
emerging adults, one adult stood out as the leader, and responded to questions quickly and had numerous views on the matters under discussion. I therefore made an effort to include the quieter participants to respond, in order to elicit a wide variety of responses. The participants' non-verbal language indicated an openness for sharing, especially as the group progressed. The atmosphere was creative and open, and the participants enjoyed viewing the images. There was a lot of laughter and bouncing ideas off one another. This was especially evident when the participants had to share their opinions and perspectives of the images from the themes, photos, stamps and words.

The focus group discussions for the educational psychologists were generally well organised and as moderator I tried to construct an atmosphere where the participants felt appreciated and that they could open up and share experiences. The purpose, aims, informed consent and confidentiality agreement were discussed at the beginning of the focus groups (see Annexures A and B). The educational psychologists felt comfortable to share and voice their opinions. The participants' sharing ideas was spontaneous and in collaboration with one another. No specific individual presumed a leadership role, and respectful sharing was evident. Unfortunately, due to circumstances, many of the participants could not attend the second focus group. This group was smaller, but the smaller size helped that the participants could contribute more perspectives and ideas. The skill set of the educational psychologist lies within communication and it was apparent that a respectful atmosphere was created in the focus groups. The participants' non-verbal language indicated an openness to sharing and the atmosphere was innovative and unrestricted. The participants felt comfortable to share their experiences and voice their suggestions and opinions.

### 5.3 Discussion of analysis

The following are some of the comments of the participants. I realise that there are grammatical mistakes (it is also important to note that English is not the home language of most of the participants), but for authentic analysis, it is important to represent this as reported by the participants.

#### 5.3.1 Title page and themes of the photo therapy tool: Young adults



The following aspects came to light during the focus group discussion with the young adults regarding the Title Page and the different themes that can be selected to personalise the Title Page for the different photo albums that can be created.

In general, the young adults' opinions and perspectives of the Title Page with the different themes to be selected, were positive; they felt that it covered a **VARIETY** of ideas.

Participant: *"...very good platform because it covers many aspects..."*

Participant: *"...good platform to start conversation..."*

Participant: *"... will have something to say about all of the themes, and if it covers many themes..."*

Participant: *"I feel like you considered every theme because every theme says a different story..."*

Participant: *"...but its good..."*

The young adults felt that this would assist clients in the process of therapy to share what is important to them. The themes would assist the therapist and the client in

### **STARTING A CONVERSATION.**

Participant: *"They are really scared, they have anxiety. So, all those kinds of feelings come forward. When you show a picture, they can talk about that picture and they won't realise they're talking about their own problems or own issues. So, it will be brilliant, it's a brilliant idea, really good and it will really work with every client you have, children, adults, everyone."*

Participant: *"...a nice platform to start your conversation, why did you pick that specific picture, how it makes you feel, what does it say about you as a person..."*

Participant: *"...few themes that's really dark. Like if you're looking, like over there it comes up dark ... that's the cool thing about these themes, that you share experiences..."*

The themes reflected the **DIVERSITY** of the South African context and the young adults' life worlds.

Participant: *"...wallpaper for your entire programme, and given the age group and the South African context, I think all the themes encompass the different people that you may encounter."*

Participant: *"...there's the South African context, and in the South African context, we get different types of people, different types of personalities, backgrounds, and cultures. So, these themes do encompass all of that..."*

Participant: *"So the themes, I was really touched there, because they looked perfect."*

The following aspects were suggested to improve the Title Page and the different themes, thereby improving these and reflecting on the young adults' life worlds.

**SUGGESTION:** The incorporation of an instant '**SELFIE**' to be part of the Title Page.

Participant: *"...nice to have like a Snapchat filter, whereas like the person can take a selfie, and then from that, incorporate their own face with a filter as the theme for their page..."*

**SUGGESTION:** The **INCORPORATION** of a status message or, as suggested, a **THERAPEUTIC GOAL** to be part of the Title Page.

Participant: *"...you choose a blank slate with colour and then you type your status message. So maybe that would be something interesting, like I choose a blank slate with the colour and then I tell myself, like maybe I put my therapeutic goal there or what I hope to achieve or something interesting like that..."*

**SUGGESTION:** The possibility to keep **STATUS MESSAGES** clients can **REFLECT** on in their process.

Participant: *"...storage room for you to actually keep it. So, you can look back at the end of the therapy, you can look back into the beginning and saying those were your thoughts in the beginning, look at your thoughts now..."*

**SUGGESTION:** The participants indicated that they felt that some of the themes were somewhat childish, and should reflect their generation. The participants made the following suggestions in this regard:

Participant: *"...bit too like childlike..."*

They felt it must reflect their generation –

Participant: *"...because we're like millennials ..."*

**SUGGESTION:** The following suggestions were made with the agreement of the participants to improve the themes of the Title Page:

Participant: *"...much more modern..."*

Participant: *"...it's not got to look like a girlie ...guy would like and also that a girl would like..."*

Participant: *"...unisex type..."*

Participant: "...black and white..." and "...pop of colour..."

### 5.3.2 Stamps of the photo therapy tool: Young adults



The following came to light while discussing the stamps, in that the participants compared it with emotions and they agreed the stamps were **VERSATILE AND MULTICULTURAL**.

Participant: *"It's like emoji's!"*

Participant: *"Also very versatile as well..."*

Participant: *"Multicultural perspective..."*

**SUGGESTIONS:** The following suggestions were made by the young adults to be included in the stamps:

Participant: *"Street wear."*

Participant: *"Sneakers."*

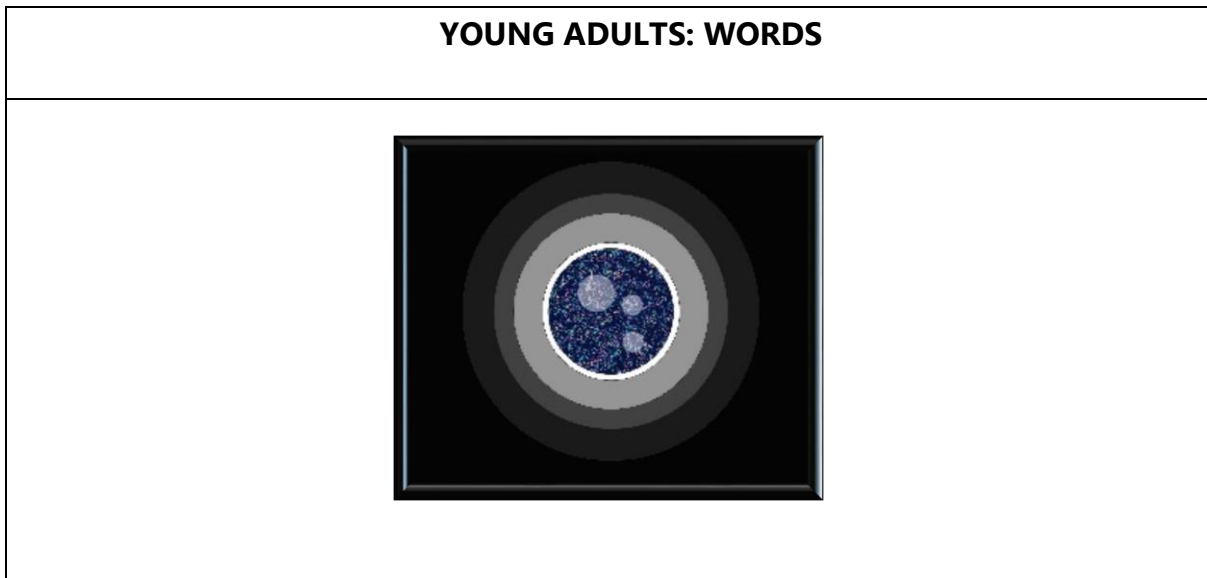
Participant: *"Hoodies."*

Participant: *"...stamps correspond to the themes..."*



Participant: *"...use more objects... or just random things... WhatsApp emoji's, you will see there's a lot of just objects there and it has no reason, but sometimes you just use it and it's nice to have that there..."*

### 5.3.3 Words of the photo therapy tool: Young adults



The participants emphasised the use of words to assist in the **EXPRESSION OF FEELINGS**, so that it may further assist in process of therapy.

Participant: *"Because sometimes, you can't think of a word to explain your feelings. So, if you see it, especially with the theme in the background, it's going to immediately give a kick-start to your thoughts..."*

Participant: *"That's very nice..."*

Participant: *"I think there are enough words..."*

**SUGGESTIONS:** When inquiring about the words to be included, the participants had the following recommendations:

Participant: *"...facial expression that goes with the words..."*

Participant: *"...comical, some a bit plainer..."*

Words to be included:

Participant: *"Dope – it's cool..."*

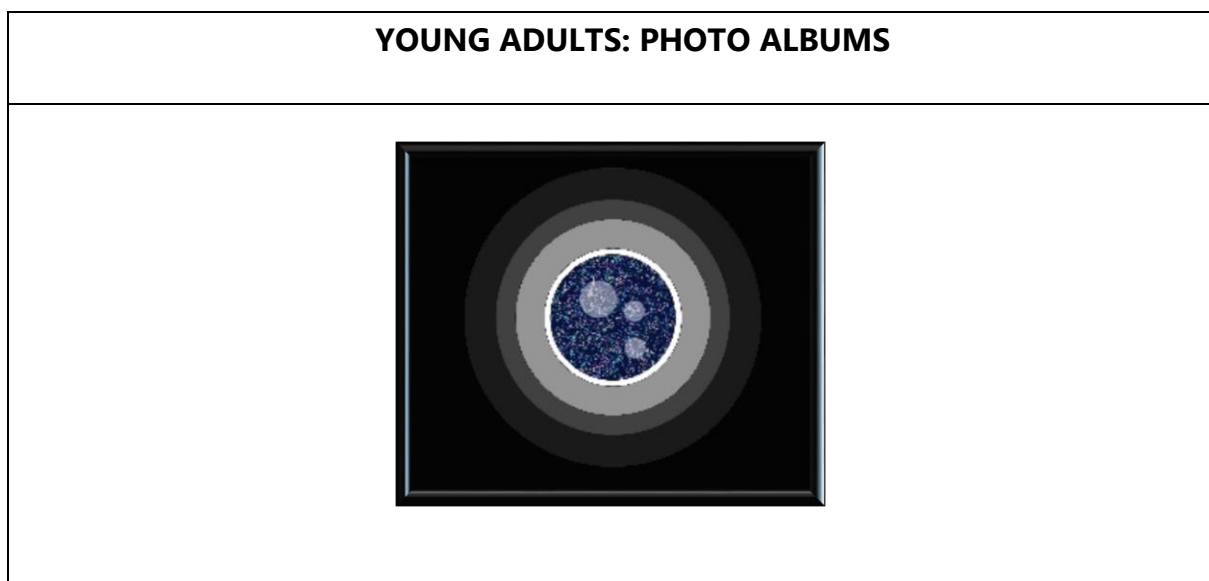
Participant: *"Woke - Like you must be alert to things, you must wake up to things, so like... Like you say that now I'm woken..."*

Participant: *"...maybe like the short stuff that people actually like... Like: LMAO... Laugh my ass off. It's the WhatsApp slang; we'll send you a list..."*

The participants indicated the **EASINESS TO UPDATE** – a programme can always be updated and the process is, therefore, interactive.

Participant: *"...you can always update it, you can always update to a new version or new themes"*

#### 5.3.4 Photo albums of the photo therapy tool: Young adults



The participants indicated the powerfulness of photographs in that it can **EXPRESS FEELINGS** and tell stories:

Participant: *"...kind of see those people's feelings for that day because a picture is worth a thousand words."*

Participant: *"It's a nice way for the client to start talking about their feelings, because it's very hard, it's very hard for clients to talk about their feelings, because sometimes they don't really know how they feel; they don't really know what issues they have... So, if you look at the picture, that emotions that's been buried for a long time would come up."*

A participant made the comment that her photo albums were important and something she would rescue in case of a fire. This indicates the importance of photographs as **HOLDERS OF MEMORIES**.

Participant: *"...my photo albums and I have memories, so I'd take my photo albums..."*

The participants also commented on the aspects of the Photo Albums – they liked the fact that the photographs could be edited after having been downloaded. The **NEWNESS AND FRESHNESS** of the approach were also commented on.

Participant: *"You can even do... is that editing the picture? That is nice."*

Participant: *"I like the fact that it's fresh and new. It's not something that I've ever encountered..."*

Participant: *"...it's really brilliant and I wish I'd thought about it. No, I'm joking, it's very good, it has a lot of aspects and a lot of stuff you can use, it's not just one thing, it's a lot of different activities they can do with the photos."*

Participant: *"It makes the therapist cool..."*

Participant: *"...we post status updates all the time, and sometimes we give out negative energy, and this app is actually taking the psychologist to a next level, like you are now bringing therapy to a next level with this..."*

The participants commented on the **SAFE PLATFORM** for expression – on this platform, true emotions could be shared.

Participant: *"...because on social media they will chew you for having a bad day. So, when you post on your app you actually have somebody that you can actually confide in..."*

Participant: *"...it's a very safe platform."*

### 5.3.5 Projective albums of the photo therapy tool: Young adults



The participants could **RELATE** to the photographs in the Projective Album – they felt that the photographs evoked emotions

Participant: *"Again, I literally have something to say about every picture, so every single picture..."*

Participant: *"...every picture that appeared I could relate to it, about events that had happened in my life, it was easy for me to relate and it evoked some emotions."*

The **STORIES OF THE PHOTOGRAPHS** assisted in the process of therapy.

Participant: *"...all the pictures had a story to tell and you can actually just use one picture for an entire counselling relationship with your client..."*

Participant: *"...there are many current pictures that tell a current story, a coming story or a previous story. So, they are timeless basically."*

Participant: *"...you know, just one picture can tell a different story for every single person... the glass of booze may have been Appetiser but if you're not...so you get one picture, different stories for each person..."*

The photographs can help to **CONVEY EMOTIONS** that are difficult to express.

Participant: *"...Or sometimes when they want to express themselves, but it's very hard to use words, so you can use the pictures, and say I'm relating to the picture, this is what I'm feeling at the moment but it's so hard to express it."*

Participant: *"I think it also helps you to get to know your client..."*

Participant: *"...you gave me pictures, and I could talk based on the pictures, easily like that. You could easily evoke emotions from the pictures instead of having to ask. Because you know when you go to psychologist sessions, they ask a lot of questions, how do you feel? A picture is that it is easy for me to say how I feel ..."*

Participant: *"...as well the visual arts, the visual perception, everything, all of that, is very nice. You sort of found a way to easily express yourself, rather than talking."*

Participant: *"Well I don't have to think about it a lot, I liked everything."*

Participant: *"I like the pictures because they ... don't... how can I put this, they don't show much, so a lot of the input will be by the client, just expressing..."*

The participants said that the photographs in the Projective Page **CONSIDERED DIVERSE YOUNG ADULTS' LIFE WORLD**.

Participant: *"Yes, it does encompass the young person's life experiences..."*

Participant: *"Diverse, it's very diverse."*

**SUGGESTIONS:** The following hints were given by the young adults on the Projective Photographs:

Different couples in relationships:

Participant: *"I think like a little ...mix couples?"*

Participant *"...weird couples, like the ones that dress funny - guy will have longer hair and has tattoos and all of those things – artistic couples..."*

Inclusion of everyday "stuff", for example:

Participant: *"Shoes..."*

Participant: *"Laptop..."*

Participant: *"And clothes..."*

Participant: *"Shoes, laptop and phone..."*

Participant: *"Nike and Adidas because that would be like those are the top sneaker brands..."*

They wanted to include a more modern urban feeling in the photographs.

Participant: *"Maybe more like city life, busy streets, all that stuff there, and town and then..."*

Participant: *"...cool kids doing something..."*

Participant: *"I still want to paint the picture. I think I want to paint the picture. So, do want something like, you see ... I'm going to have to be frivolous and say like Mr Price adverts, when they're like advertising jeans and then people are walking."*

Participant: *"...person in baggy jeans, and like handbags...more like modern culture..."*

The importance of music was also mentioned by the participants:

Participant: *"...also have music in there..."*

Participant: *"Different genres of music..."*

Participant: *"Like House, there's Kwaito, there's Hip-Hop, there's Gospel, there's classical music..."*

The participants advised that the following religious aspects should be included:

Participant: *"A Bible..."*

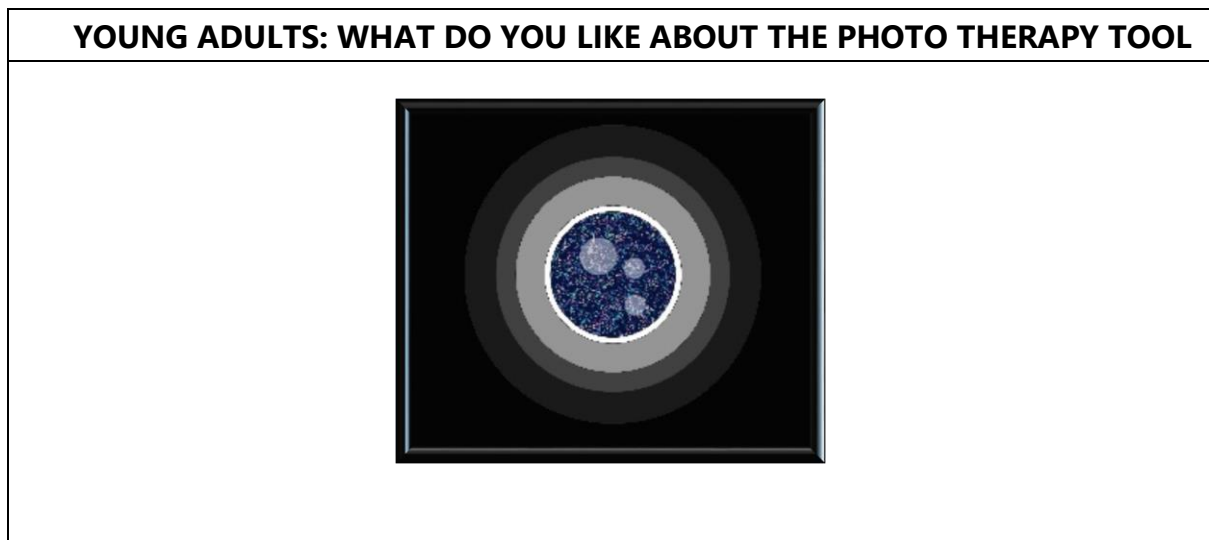
Participant: *"Spiritualism..."*

Participant: *"And also have the henna."*

Participant: *"And a little bit more Buddha..."*

Participant: *"Maybe science, because not all people are specifically religious, more like the Big Bang Theory or something like that, science..."*

### 5.3.6 What do you like about the photo therapy tool?



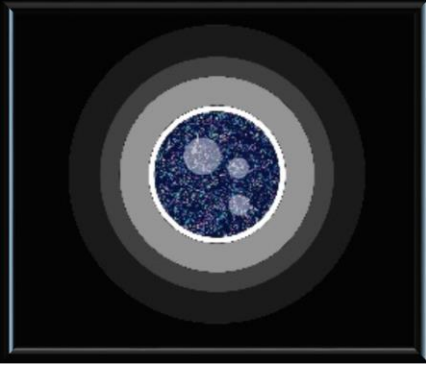
The **ELECTRONIC PLATFORM** is something that stood out for the participants.

Participant: *"Well I like the fact that it's an App, you know, that it's on your phone..."*

The **PERSONALISATION** of the photo therapy tool is one of the things that also stood out.

Participant: *"I like that it's personal to the specific patient. So, they make their own title, album, so basically, we deal with... this... it's a personal thing, it's not too broad and they can feel a connection to it because it's their own..."*

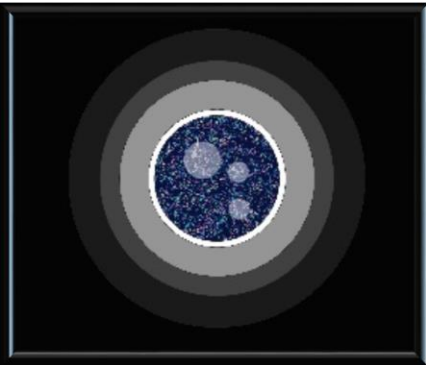
### 5.3.7 What do you dislike about the photo therapy tool?

YOUNG ADULTS: WHAT DO YOU DISLIKE ABOUT THE PHOTO THERAPY TOOL


In general, the participants felt they had given **SUGGESTIONS FOR IMPROVEMENT**, and that these needed to be included. They did not feel there were many aspects that they did not like.

*Participant 1: "I'm a person who likes seeing real things, so I want to see a photograph of an actual person, and I want to relate to something because it's real."*

### 5.3.8 Does it consider your (young adults') life experiences (life world)?

YOUNG ADULTS: DOES IT CONSIDER YOUR (YOUNG ADULTS') LIFE EXPERIENCES (LIFE WORLD)




The participants agreed that the photo therapy tool **CONSIDERS THEIR LIFE WORLD.**

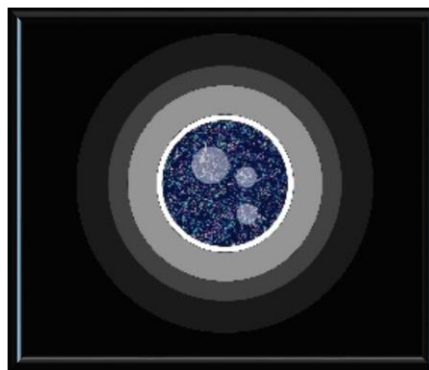
Participant: *"It does."*

Participant: *"It does, there was graduation, and there was booze, so it's good."*

Participant: *"I like the pictures because they ... don't... how can I put this, they don't show much, so a lot of the input will be by the client, just expressing. It does."*

### 5.3.9 Do you think the photo therapy tool is race-, religion- and culture-friendly? Does it reflect the South African context?

**YOUNG ADULTS: DO YOU THINK THE PHOTO THERAPY TOOL IS RACE-, RELIGION- AND CULTURE-FRIENDLY? DOES IT REFLECT THE SOUTH AFRICAN CONTEXT**



In general, the participants felt they had given suggestions for improvement, and that these needed to be included. They did not feel there were any aspects which they disliked; they established that the photo therapy tool is race-, religion- and culture-**FRIENDLY** – a reflection of the South African community.

Participant I: *"I think it did, but more so with the suggestions that we gave of different people and cultural..."*

Participant: *"Yes."*

Participant: *"Mm"*

Participant: *"It does. Absolutely yes."*

Participant: *"... it does, a lot."*

Participant: *"A lot yes, maybe too much but its good..."*

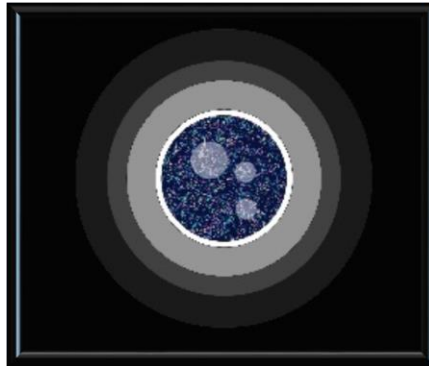
Participant: *"...I think it shows all aspects of our country..."*

Participant: *"So I think it encompasses a whole wide variety..."*

Participant: *"But it really covers everything..."*

### **5.3.10 Would you like to use the photo therapy tool in therapy with a psychologist?**

#### **YOUNG ADULTS: WOULD YOU LIKE TO USE THE PHOTO THERAPY TOOL IN THERAPY WITH A PSYCHOLOGIST**



The participants agreed that they would like to **UTILISE THE PHOTO THERAPY TOOL** with a psychologist in therapy.

Participant: *"Jah."*

Participant: *"Jah."*

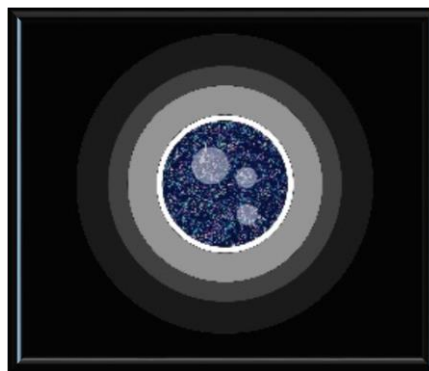
Participant: *"Yes."*

Participant: *"Yes, definitely."*

Participant: "...because the client's going to want to come back the whole time."

### 5.3.11 One last thing you want to say about the photo therapy tool?

#### YOUNG ADULTS: ONE LAST THING YOU WANT TO SAY ABOUT THE PHOTO THERAPY TOOL



In general, the participants were **POSITIVE** about the photo therapy tool.

Participant: *"This is a great idea."*

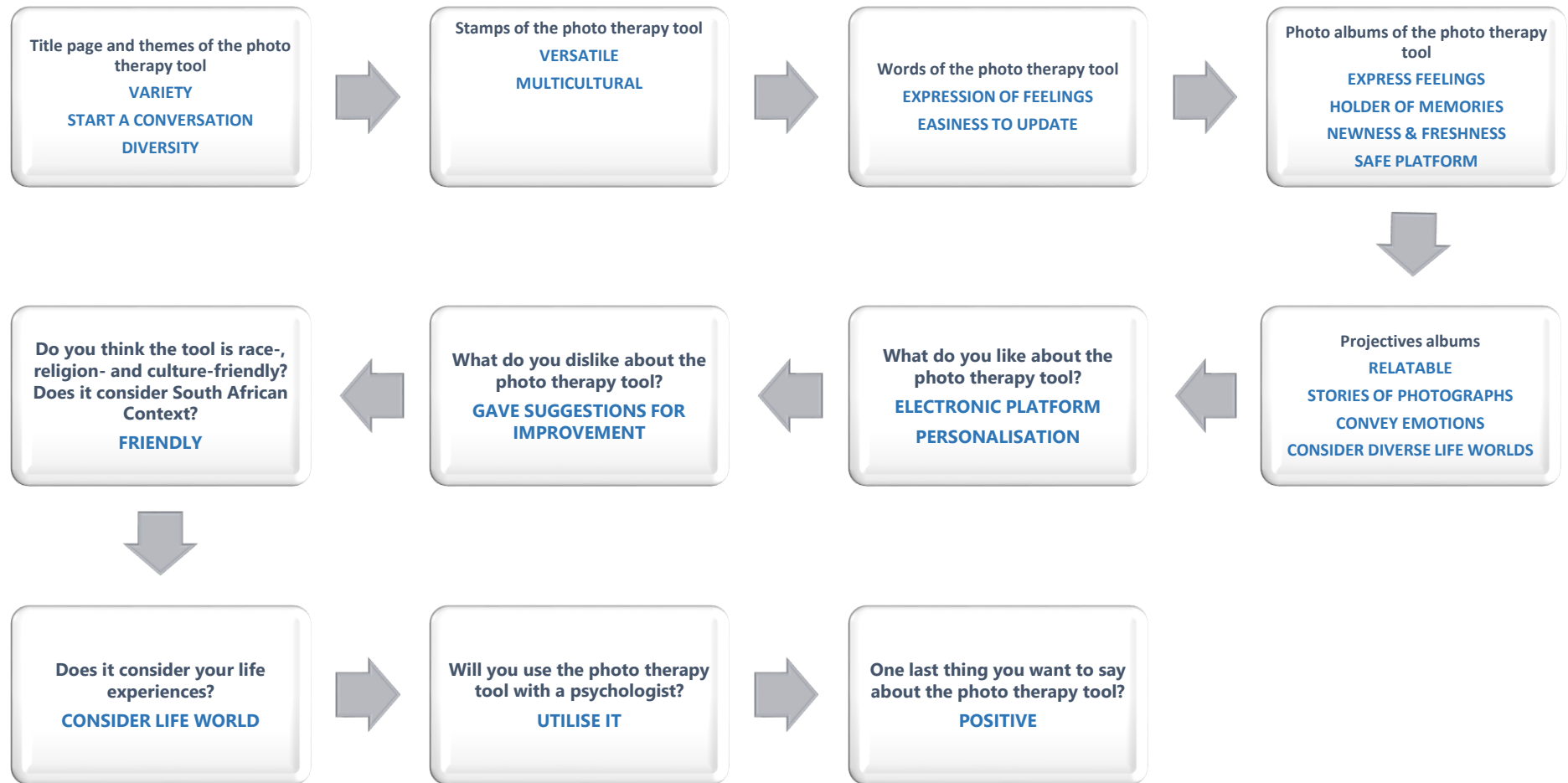
Participant: *"Yes well done!"*

Participant: *"I hope it gets incorporated into the field."*

Participant: *"And I also just want to comment on the age thing... I really think it can be applicable for any ages."*

### 5.3.12 Themes resulting from the young adults' focus groups

Diagram 5.2 illustrates the themes resulting from the young adults' focus groups – photo therapy tool.



**Diagram 5.2: Summary of the themes resulting from the young adults' focus groups – photo therapy tool**

### 5.3.13 Title page and themes of the photo therapy tool: Educational psychologists



The following aspects came to light during the focus group discussion with the educational psychologists regarding the Title Page and the different themes that can be selected to personalise the Title Page and the different Photo Albums that can be created. The themes may assist gaining insight into **DEEPER EMOTIONS AND FEELINGS**.

Participant: *"...can explore on that theme. Then you will tap into the deeper emotions..."*

Participant: *"...because you already have the choice of the front page, you already have an idea about what is going on emotionally with that person..."*

It brings the **UNCONSCIOUS TO THE FORE** – the aspects that are on the client's mind come to the fore and therapist and client can explore feelings and emotions.

Participant: *"...it depends what is in the clients' unconscious, how you will look at that thing..."*

Participant: *"Exactly. He is going to tell you what it is about."*

In the selection of the theme, the therapist already gets a glimpse of what is happening to clients emotionally. It gives **GUIDANCE** to the therapist in the therapeutic process.

Participant: *"It is providing guidance in terms of what is happening to client..."*

Participant: *"...something behind that that you need to investigate..."*

The selection of themes **EXPRESSES ONE'S EMOTIONAL WELLBEING** at this moment in time.

Participant: *"Talk to perception to your emotional wellbeing at that stages when you look at the pictures..."*

The photographs are embedded with **PERSONAL PERCEPTIONS** the viewer project their story, their welfare onto the photograph and that makes the photograph a powerful tool in therapy.

Participant: *"...about your pictures, your pictures speak to me more a about your perception, based on your own personal background and not your race. And also your emotional welfare at that moment when you choose that photograph."*

**SUGGESTIONS:** The following suggestions were made to add to the themes for the

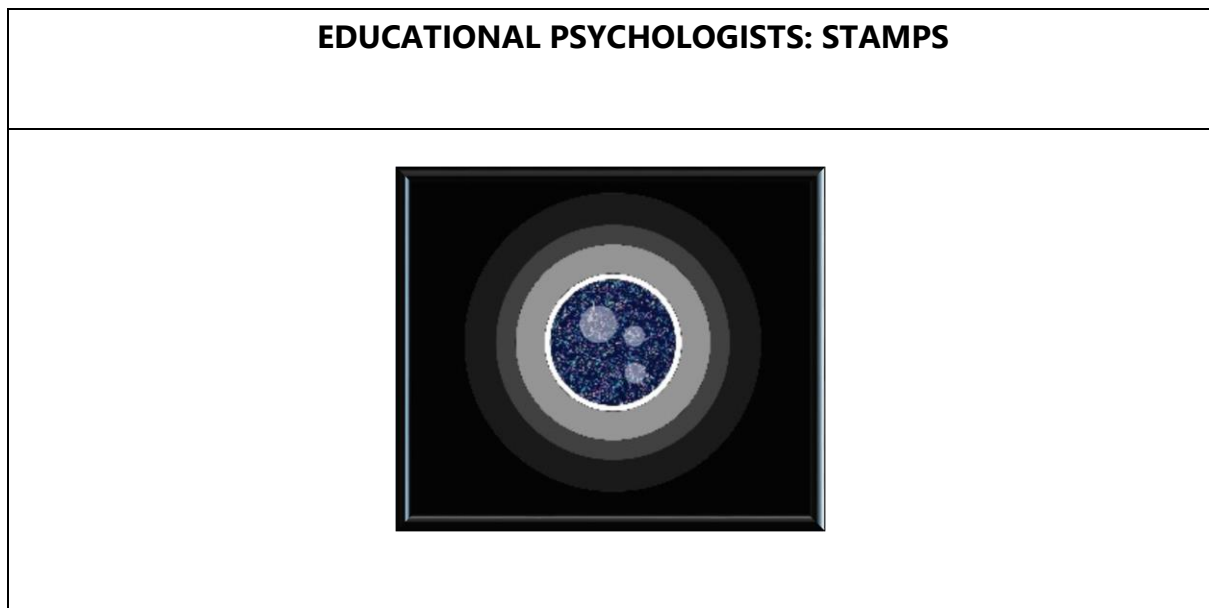
Title Page:

Participant: *"I am fine and also what I wanted is a theme around sickness, it is more like HIV and AIDS..."*

Participant: *"...they must be like together in a way. We can have a balance on that so that..."*

Participant: *"...are staying in the squatter camps. Let's look at things like that and let's show the type of life..."*

### 5.3.14 Stamps of the photo therapy tool: Educational psychologists



The following came to light regarding the stamps – it **HIGHLIGHTS A LOT OF ASPECTS:**

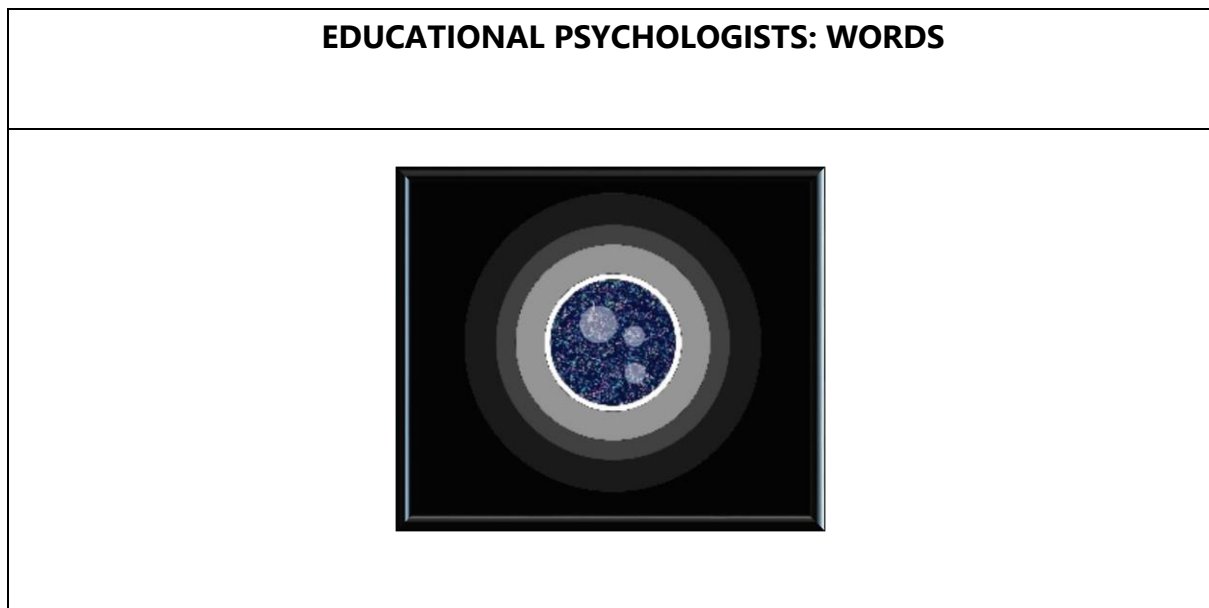
Participant: *"...they touch a lot of things, but again, to look at our socio-economic uh background and so on, if we could maybe uh, that sign of HIV..."*

In the selection of the stamps, there is **SYMBOLIC VALUE**. In the selection of the stamps, one highlights one's emotional feelings.

Participant: *"Each stamp has a symbolic value..."*

Participant: *"That leads to symbolic value..."*

### 5.3.15 Words of the photo therapy tool: Educational psychologists



The word assists to **EXPRESS OWN MEANING** and assists in **COMMUNICATION**. It makes the process **EASIER FOR THE CLIENT TO OPEN UP** and **HELPS THE THERAPIST** to guide the therapeutic process.

Participant: *"It is excellent..."* The word and the picture assist to express feelings.

Participant: *"...help with communication..."*

Participant: *"...I like the words, with the creative aspect and that you can give your own meaning..."*

Participant: *"I am mad about the art there. It, I think it opens up a new field that incorporates creativity as well as it gives your own meaning. And it is far less boring as the TAT and those kind of tests that we see..."*

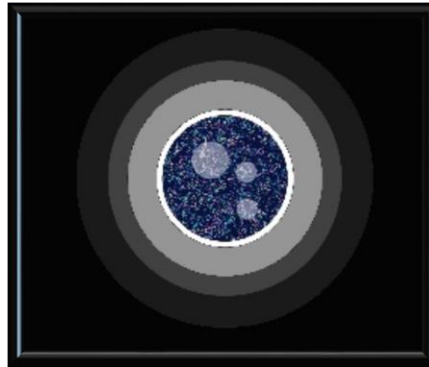
Participant: *"I like that is for now, we have a problem in South Africa everything is old fashion..."*

Participant: *"...make it easier to talk..."*



### 5.3.16 Photo albums of the photo therapy tool: Educational psychologists

#### EDUCATIONAL PSYCHOLOGISTS: PHOTO ALBUMS



The participants agreed that the photo therapy was **RELEVANT** for young adults, especially with their fascination with selfies and the everyday occurrence of taking photographs. The **NARRATIVE** nature of photographs was also expressed as a South African value.

*Participant: "...but I think in this day and age it is quite relevant because you get people especially the young adults that you are focusing on who like to do selfies, I think there are a lot of stories in those selfies, and as South Africans we are people who love stories, so I think it's going to be very useful to that one can use in a therapy sessions..."*

*Participant: "People they connect with taking of a picture and a photograph..."*

The photographs **ASSIST IN THE PROCESS OF THERAPY**.

*Participant: "...the old pictures, the what, the learner might, whilst talking on that, whilst you are conduct therapy, the learner might be able to be comforted from seeing all those pictures..."*

*Participant: "... she didn't know a lot about her parents and so on, but she happens to get an album at home and she brought it to therapy and as we went through the album she was able to remember some good memories, new things that made her feel better. So, I do think that it would be very useful and especially that it's not culturally bound..."*

Participant: "...it's easy to talk when photos in front of you, it's easy to express your feelings, you know your wishes, you remember the relationships that you had."

Participant: "Because you can get a lot of information there, what made this person to be angry? You can get a lot. "

Participant: "...if they are going to bring their photos because even now let's say maybe you are just down and then when you go through your phone there are other photos that is going to elevate your mood when you see those photos, so this is going to work."

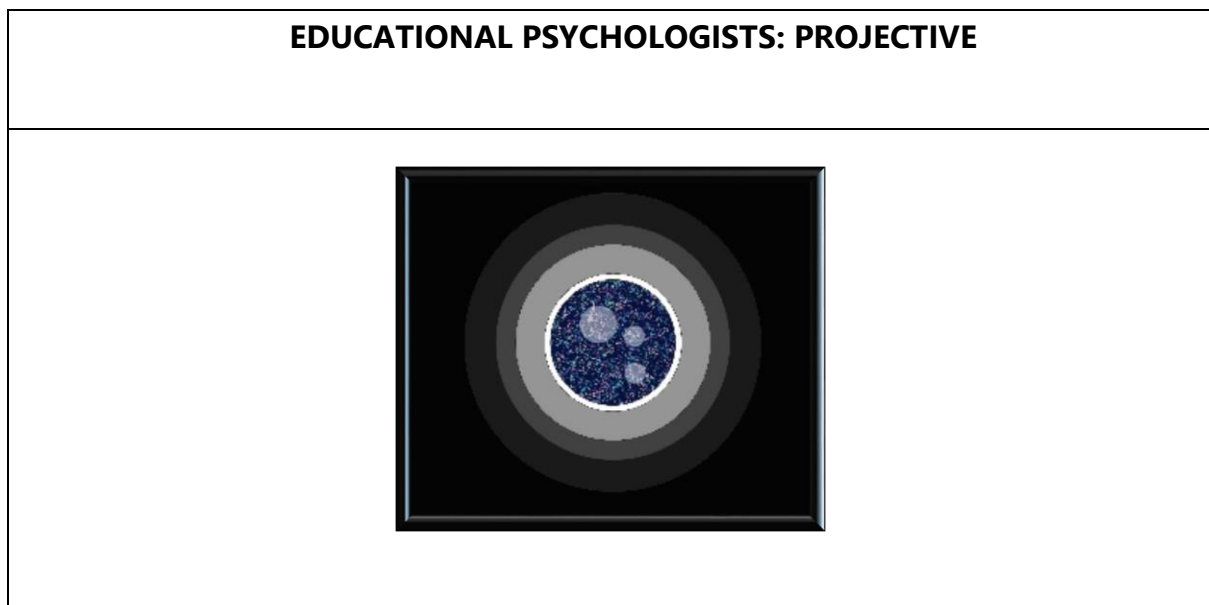
**GOOD AND NEW IDEA** and a modern take of a therapeutic tool focused on the age group.

Participant: "And it's very fresh."

Participant: "It is specifically aimed at that age group, yes."

Participant: "...a good tool to invoke communication with your client because it's not always easy to just talk without anything that is supporting you..."

### 5.3.17 Projective of the photo therapy tool: Educational psychologists



The educational psychologists commented on the **CULTURAL DIVERSITY** of the photographs and that it depicted **TOLERANCE**.

Participant: *"It shows cultural diversity."*

Participant: *"...and tolerance."*

Participant: *"And it's motivating. If a child is looking at this, maybe the child is Tsonga or Venda or Sotho, all cultures."*

Participant: *"You can get more information from one picture, and I think a client can tell how he or she feels, thinks, without being aware of that he's doing it..."*

Participant: *"...it's life fitting."*

Participants: *"...cultural and values are reflected in the photographs..."*

The participants indicated the **EXPRESSIVENESS** of the photo therapy tool – the photographs would assist clients, especially clients who found it difficult to talk about their emotions.

Participant: *"It just comes out and it can work better especially to those clients that don't want to talk about their life..."*

Participant: *"...get a lot from your clients using photo therapy."*

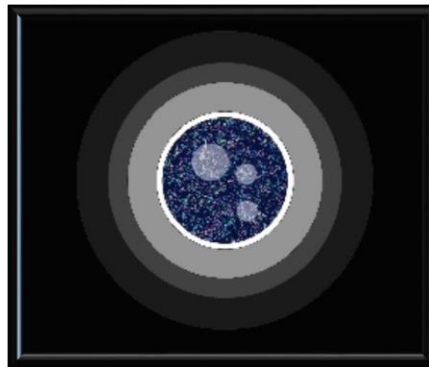
Participant: *"Yes. If he has something that he can physically put down there. It makes it easier for the person to talk."*

The photographs and the choices made by the client assist the therapist in the process of exploring the feelings, emotions and stories.

Participant: *"...also leads you, the therapist, and it gives you an indication as to what direction you must go with the questions."*

### 5.3.18 What do you like about the photo therapy tool?

#### EDUCATIONAL PSYCHOLOGISTS: WHAT DO YOU LIKE ABOUT THE PHOTO THERAPY TOOL



The photo therapy tool seemed **APPLICABLE** to the educational psychologists and could be used in the South African context.

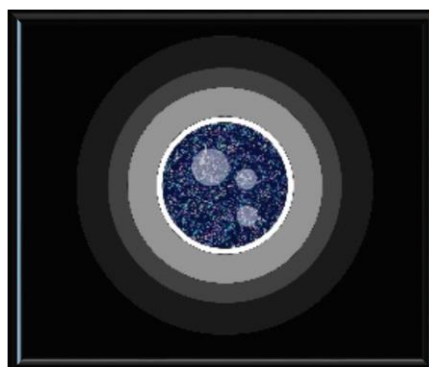
Participant: *"I like all aspects..."*

Participant: *"...what I saw was contemporary and applicable..."*

Participant: *"...is truly South African..."*

### 5.3.19 What do you dislike about the photo therapy tool?

#### EDUCATIONAL PSYCHOLOGISTS: WHAT DO YOU DISLIKE ABOUT THE PHOTO THERAPY TOOL



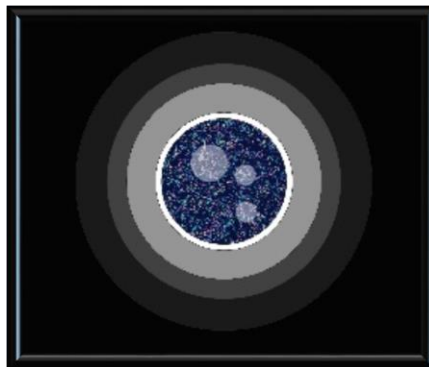
Participant: *"No, I don't have anything. There wasn't anything that I didn't like."*

**SUGGESTIONS:** The educational psychologists agreed that there were some aspects that needed to be included.

Participant: *"...has to do with illnesses, something that has to do with poverty and conflicts and something that depicts a healthy relationship and an unhealthy relationship..."*

**5.3.20 Do you think this fully take into account how young adults experience their life world? Do you think they could picture themselves in this?**

**EDUCATIONAL PSYCHOLOGISTS: DO YOU THINK THIS FULLY TAKE INTO ACCOUNT HOW YOUNG ADULTS EXPERIENCE THEIR LIFE WORLD? DO YOU THINK THEY COULD PICTURE THEMSELVES IN THIS**



The participants agreed that it **REFLECTS YOUNG ADULTS' LIFE WORLD.**

Participant: *"Yes, definite..."*

Participant: *"...yes its modern, and it can be updated..."*

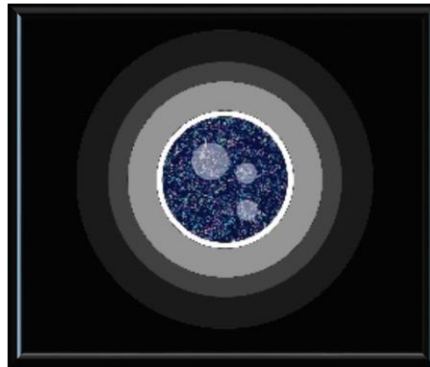
Participant: *"...yes their vocabulary..."*

Participant: *"...you zoom in on their type of communication here."*

Participant: *"There is a huge variety of clients, you don't have to think that it is just about one category. I almost want to say this technology generation."*

**5.3.21 Is the photo therapy tool race-, ethics- and culture-friendly? Does it reflect the real South African context?**

**EDUCATIONAL PSYCHOLOGISTS: IS THE PHOTO THERAPY TOOL RACE-, ETHICS- AND CULTURE-FRIENDLY? DOES IT REFLECT THE REAL SOUTH AFRICAN CONTEXT**



The participants concurred that it **REFLECTED SOUTH AFRICA** and that they saw themselves and the South African context in the photo therapy tool.

Participant: *"Naturally I think it does..."*

Participant: *"...is nice just to see yourself in the picture..."*

Participant: *"Somewhere I see myself in there..."*

Participant: *"I think it does reflect our South African context..."*

Participant: *"...yes..."*

Participant: *"You have got a nice combination of different cultural backgrounds in the last set which you showed us. The different cultures come through nicely. I saw Indian, what else did I see? Yes, there are different cultures."*

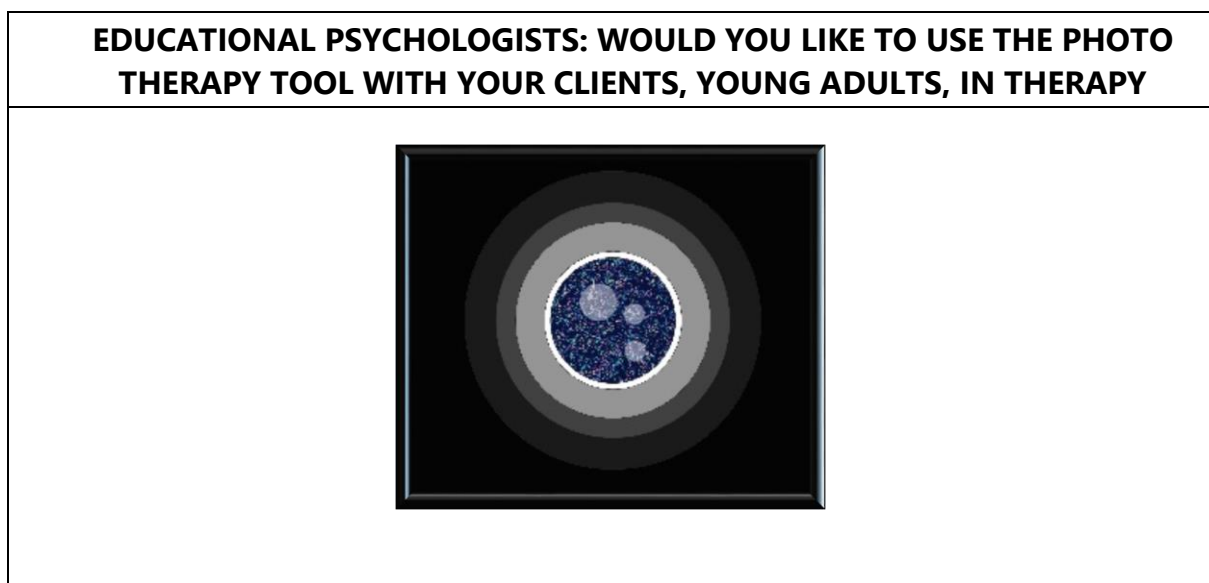
Participant: *"This makes it easier for the therapist because then you have a series of photos that deals with the emotions and there is a series photos that deals with values and norms and cultural background and so it helps the therapist already."*

Participant: *"...you can have all the different classes of South Africa; you can incorporate them all in this."*

Participant: *"All those things are covered, I think."*

Participant: *"It is genuine South African."*

### 5.3.22 Would you like to use the photo therapy tool with your clients, young adults, in therapy?



The educational psychologists pronounced that it was a **MODERN** therapeutic tool to be used.

Participant: *"Yes."*

Participant: *"Yes, especially that it is modern, you know. It's a tool that is used by the young and the old."*

Participant: *"...is for me contemporary and it is appropriate. I have a thing about new blood. So, it ticks that box that's important."*

Participant: *"I will use it. I like it to use a projection tool to draw out things..."*

The participants also suggested that the photo therapy tool can be **UTILISED WITH DIFFERENT THERAPEUTIC ISSUES** and with different clients.

Participant: *"And it can also assist us to go through our career assessment..."*

Participant: *"...it touches a lot of aspects..."*

Participant: *"...talks about the grief and this about the career counselling, just also the deeply think the trauma, so at least it is widely..."*

Participant: *"...client can make it whatever they want it to be, that is the nicest part of it because there is that space whereby the client can come out with his own thing that they want to say so it's a very useful..."*

Participant: *"It's a wonderful tool to be used..."*

Participant: *"... use in big variety of context the technological generation will understand this..."*

The **NARRATIVE QUALITY** of the photo therapy tool is an aspect that also came to the fore.

Participant: *"It's a wonderful tool that you can use for our young adults to tell their life stories about it and it will also help to project how they feel about their situations. I think it's going to help and I'm going to use it..."*

The **NON-THREATENING** quality of the photo therapy tool was highlighted and that the clients are an **ACTIVE PARTICIPANTS** in the therapeutic process.

Participant: *"I also think it's good and it's going to be a useful tool mainly because it's already things about, you operating in a non-threatening environment. Your client will not feel that I have to answer so many questions, I've got to do this and that, it just flows through and one also gets healed without being aware that there is healing."*

Participants: *"...the photographs he can easily talk to you..."*

Participant: *"...creates a friendly atmosphere..."*

Participant: *"...it gives the illusion of he is in control but he is actually 'spilling the beans' ..."*



Participant: *"I also like the fact that the tool, it involves the client."*

### 5.3.23 One last thing you want to say about the photo therapy tool?



The educational psychologists declared that the photo therapy tool was going to be a **USEFUL** intervention tool for young adults, in **DIVERSE** therapeutic settings with a variety of issues.

Participant: *"...a thing that is good and cute, it is a shiny thing, so it makes it a shiny tool in your bag..."*

Participant: *"...it addresses that age group. Because it is their vocabulary, it's their technology..."*

Participant: *"You are creating a friendly atmosphere to be able to say what you thing and how you are feeling. You are feeling safer to do that."*

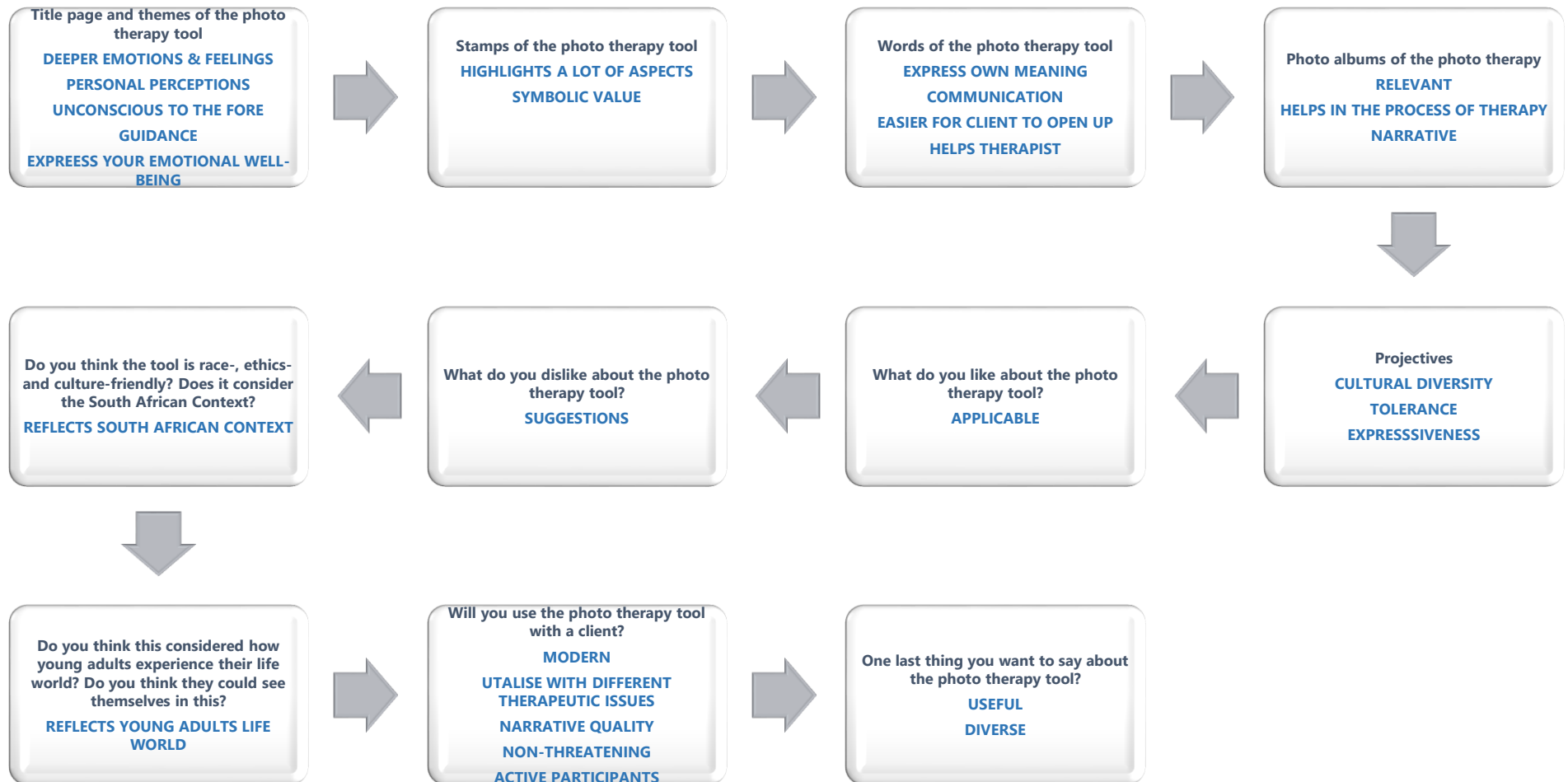
Participant: *"It's not a thing that has blinkers on. It is vast."*

Participant: *"It's a nice tool. You can use it everywhere."*

Participant: *"...it's a growth medium. It's an opportunity to emotional personal growth, which is actually what you want if the child or the client walks out of your office."*

### 5.3.24 Themes resulting from the educational psychologists' focus groups

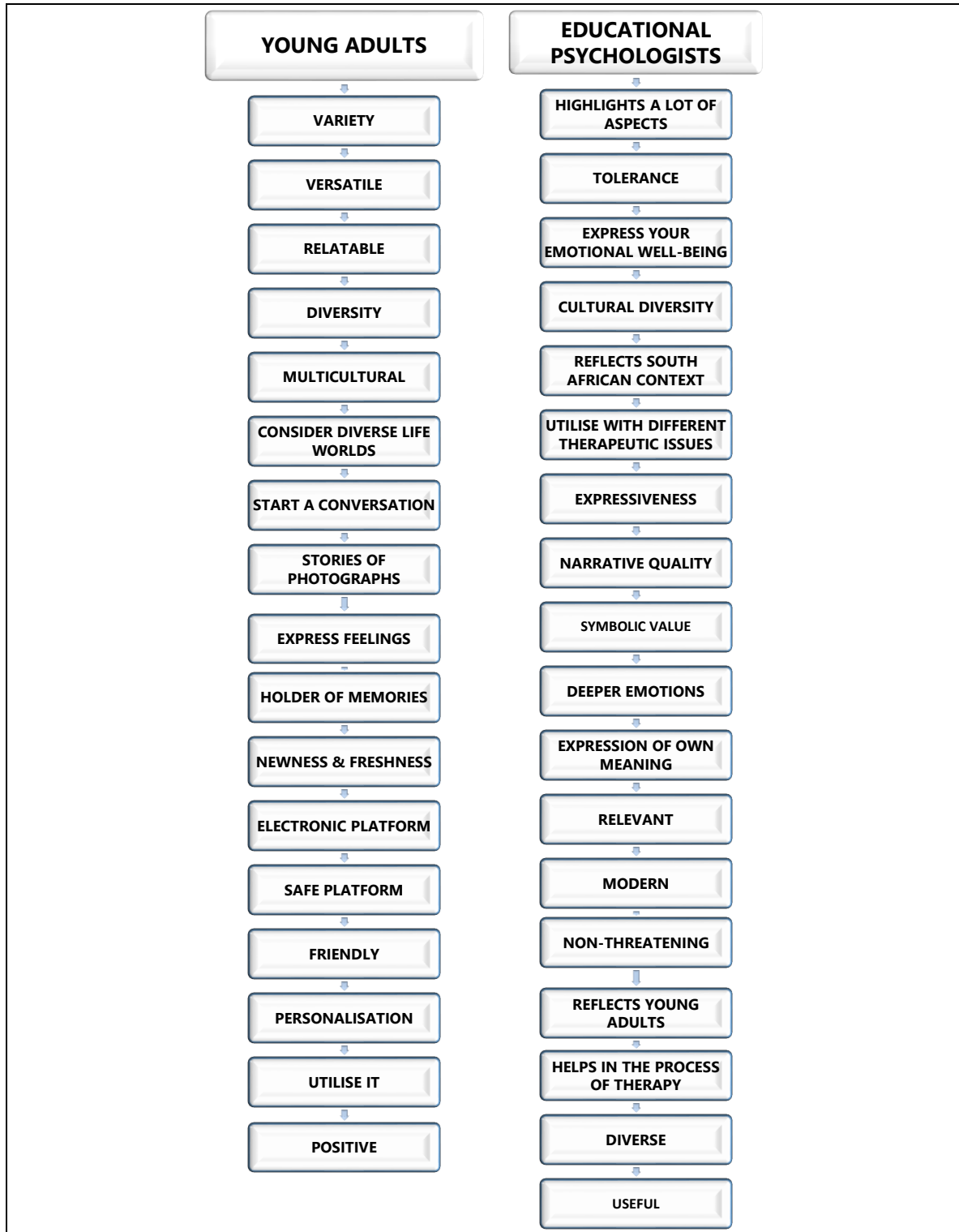
Diagram 5.3 illustrates the themes resulting from the educational psychologists' focus groups – photo therapy tool.



**Diagram 5.3: Summary of the themes resulting from the educational psychologists' focus groups – photo therapy tool**

## 5.4 Summary of themes

Diagram 5.4 illustrates the themes that have come to light in the analysis of the data from the young adults and the educational psychologists on the photo therapy tool.



**Diagram 5.4: Summary of themes emerging from participants – young adults and educational psychologists**

Diagram 5.5 represents aspects suggested by the participants to improve the photo therapy tool, as the developmental intervention design (see Chapter 3, Section 3.3 and 3.4) shows that the process of development is continuous and interactive in nature. The suggestions were included in the photo therapy tool to enhance it and to make it more workable for the South African context.

**Some of the suggestions by participants to include in the photo therapy tool**

*Sneakers, hoodies and street wear*

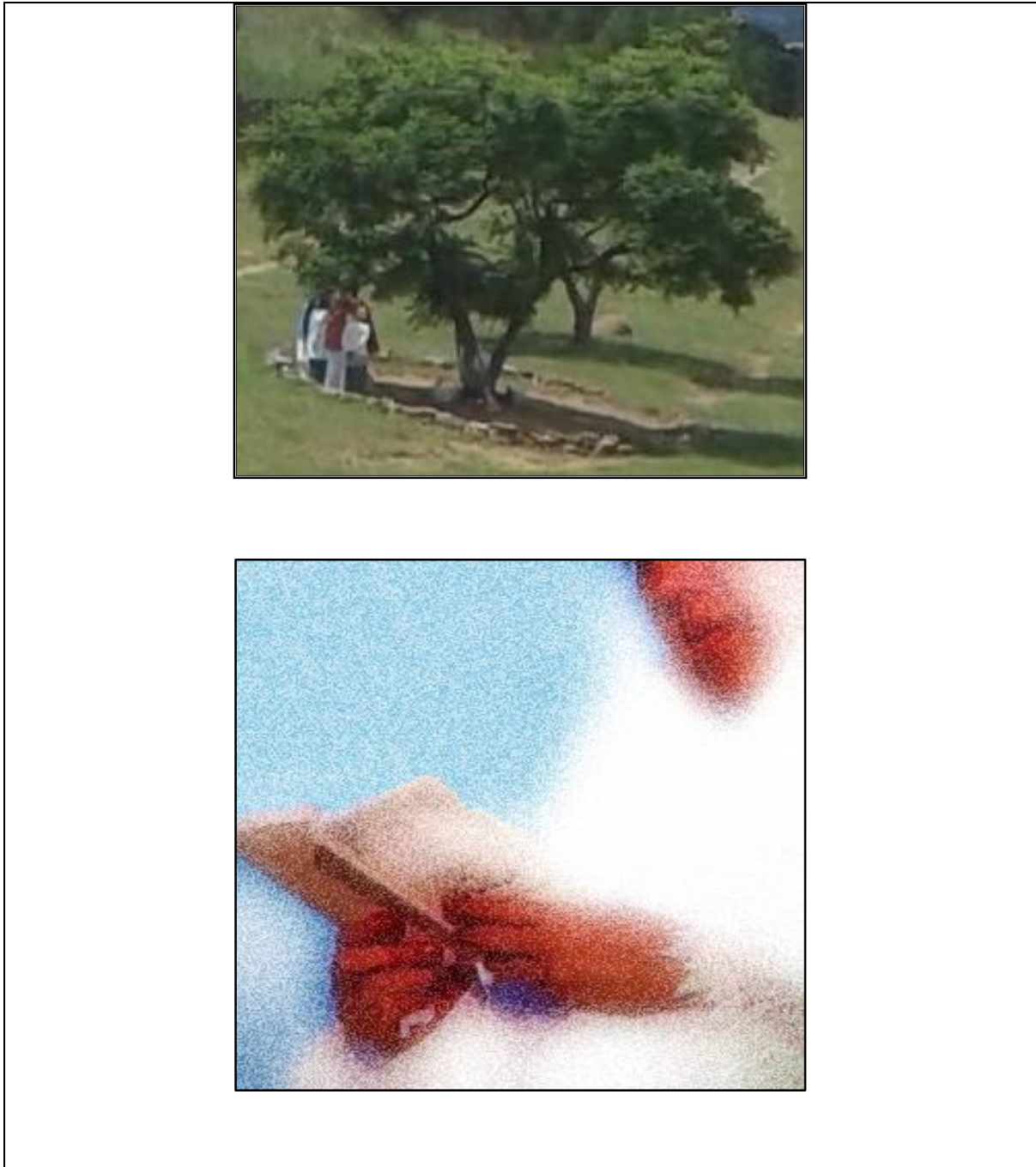


*Squatter camps*



*Different religious practices*



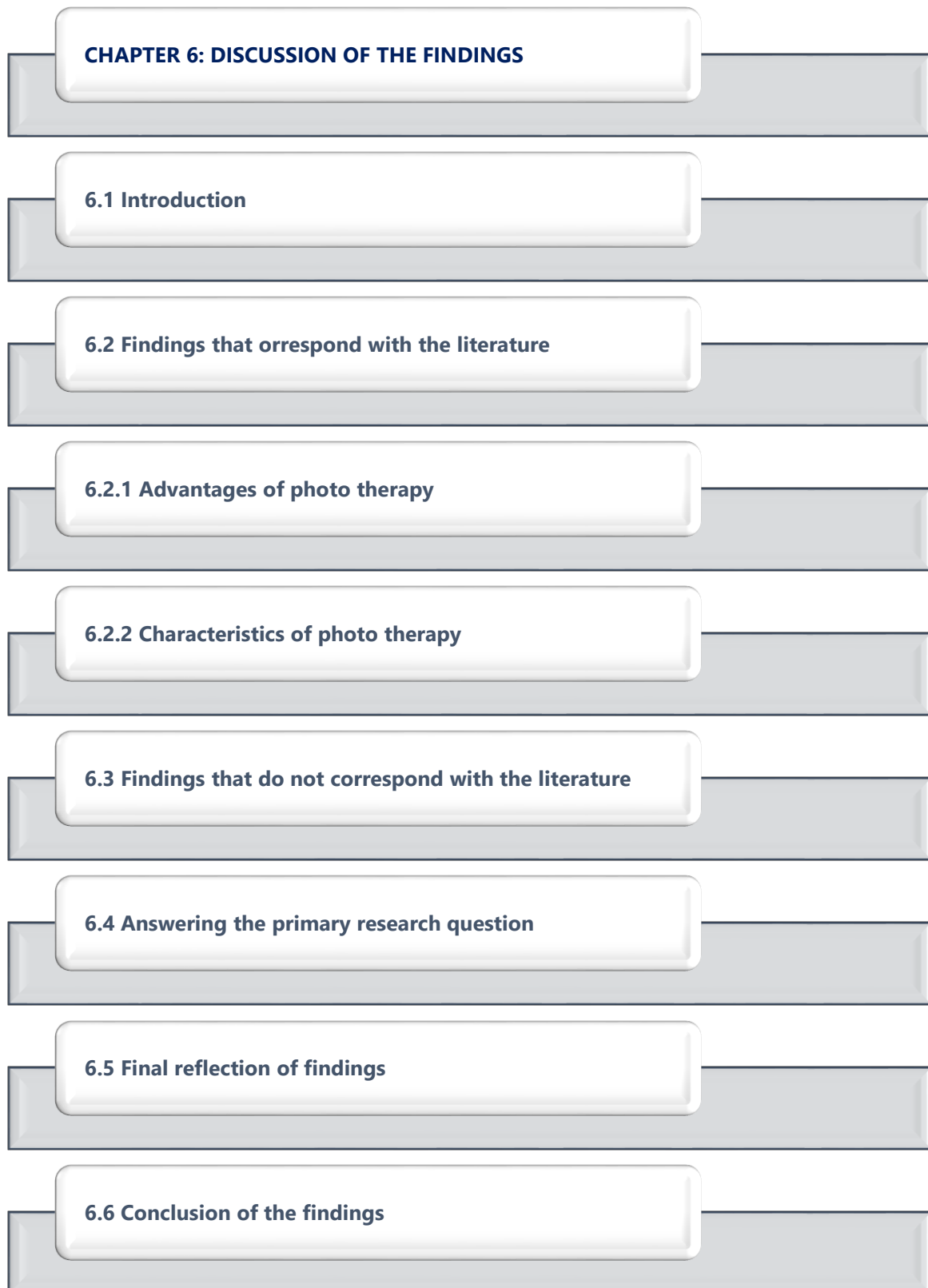


**Diagram 5.5: Some suggestions of photographs to be included in the photo therapy tool**

## **5.5 Summary**

In this chapter, I reviewed my findings in relation to the literature. I correspondingly answered my primary question – a photo therapy tool can be developed for the South African context. The findings show that the participants approved the photo therapy

tool as a valuable, modern and multicultural tool that may be beneficial to utilise in therapy by educational psychologists and young adults.



**Diagram 6.1: Overview of Chapter 6**



## **CHAPTER 6: DISCUSSION OF THE FINDINGS**

*"Fundamental to writing up qualitative research report is to present findings in a way that will be understandable and respond to the research questions and objectives, as well as allow the audience to comprehend them" (Bantwini & Arowolo, 2015:497)*

### **6.1 Introduction**

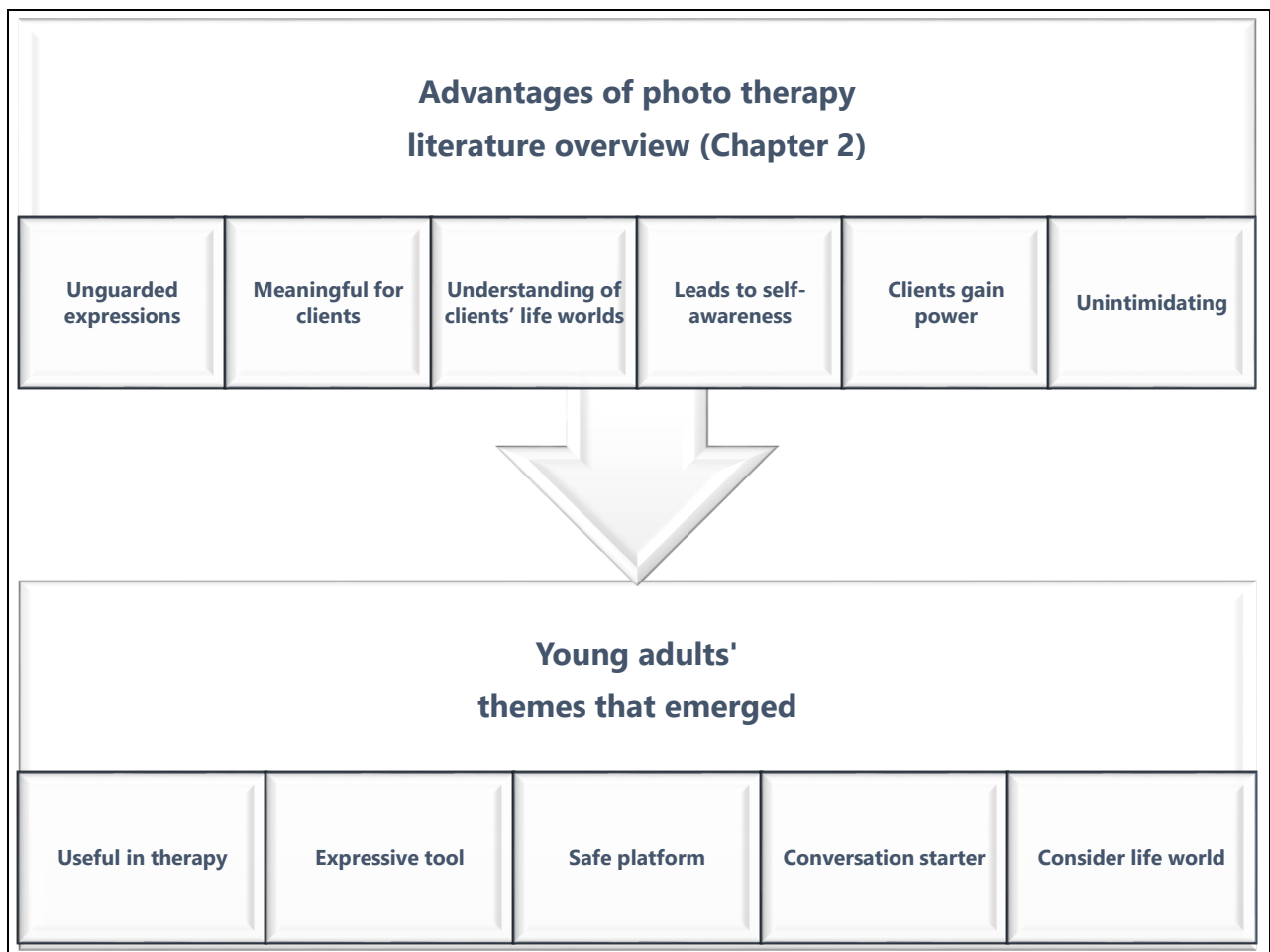
In this chapter, I relate the findings of the study to answer questions emerging from the research. I compare the findings of the literature study about photo therapy to make sense of the themes that emerged from the research. The similarities and differences are highlighted. In conclusion, I amalgamate the findings and the discussion of the sub-questions to arrive at an answer to my primary research question.

### **6.2 Findings that correspond with the literature**

The aim of the literature study, Chapter 2, was to consider the nature, history and application of photo therapy. At first, I discussed the perception of participants of the photo therapy tool and the similarities to the findings of the literature in Chapter 2.

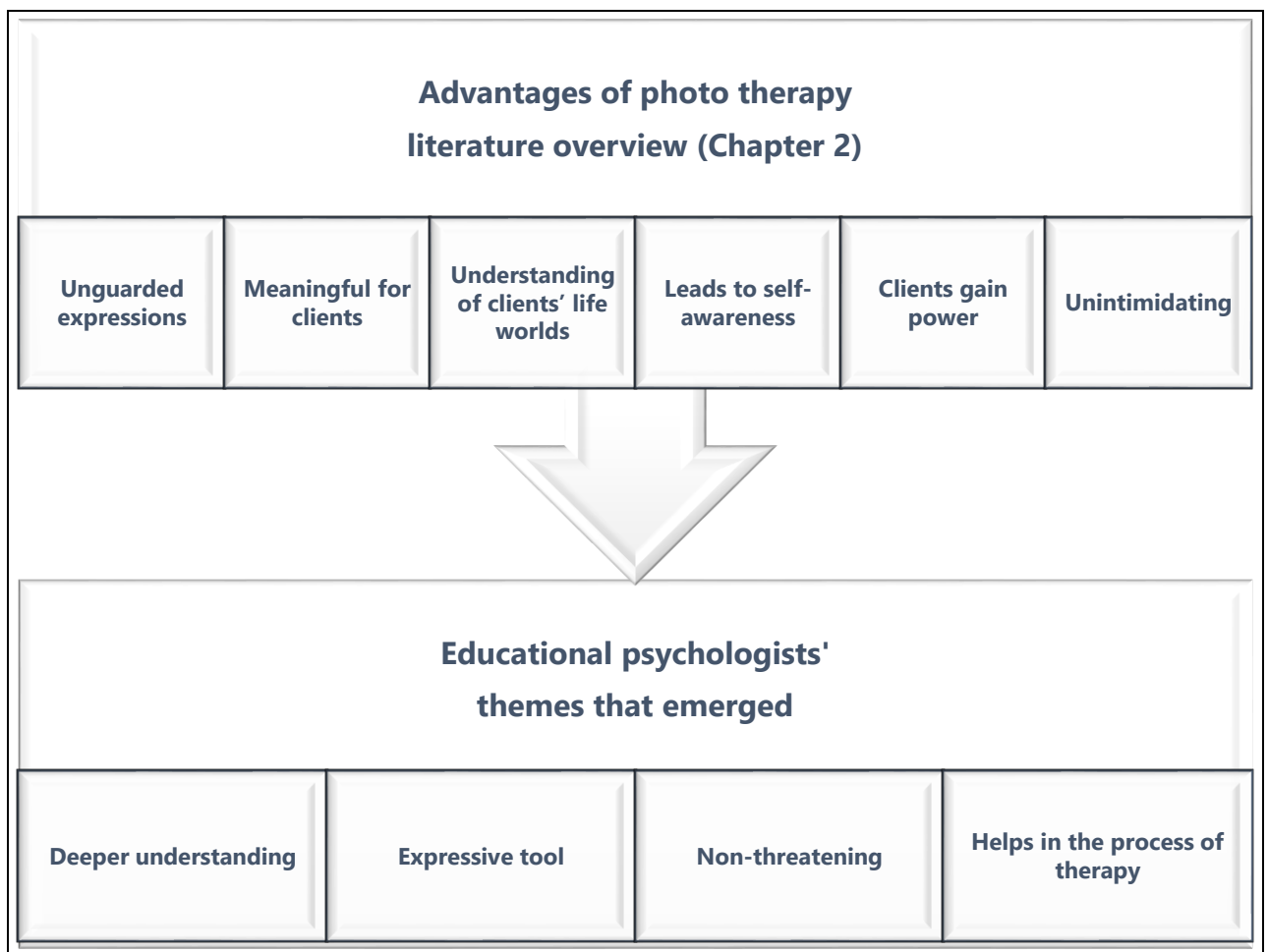
#### **6.2.1 Advantages of photo therapy**

In Chapter 2, Section 2.4, the following advantages of photo therapy were discussed: the photographs allow for unguarded expressions; photo therapy is unintimidating; clients gain power that leads to self-awareness; photo therapy leads to an understanding of clients' life worlds; and it has a meaningful impact on clients.



**Diagram 6.2: Comparison of the advantages of photo therapy from the literature and the themes from the young adults**

The young adults understood the value of photo therapy. In the focus group, it became apparent that they could relate to the effectiveness of photographs as they were mostly involved in social media and this feels 'natural' to them. They understood that the photographs were a tangible aspect to focus on and could assist in inducing a conversation as a way to understand their life worlds, in that photographs could serve as a meaningful communicative tool. The non-threatening aspect of photographs was understood, but the deeper application of gaining power and self-awareness was not mentioned, as the young adults were not necessarily experts in the application of photo therapy (or understand the process of therapy). They just appreciated the use of photographs as an ordinary act. It made sense to them, as it is a natural occurrence to document their own lives with photographs.



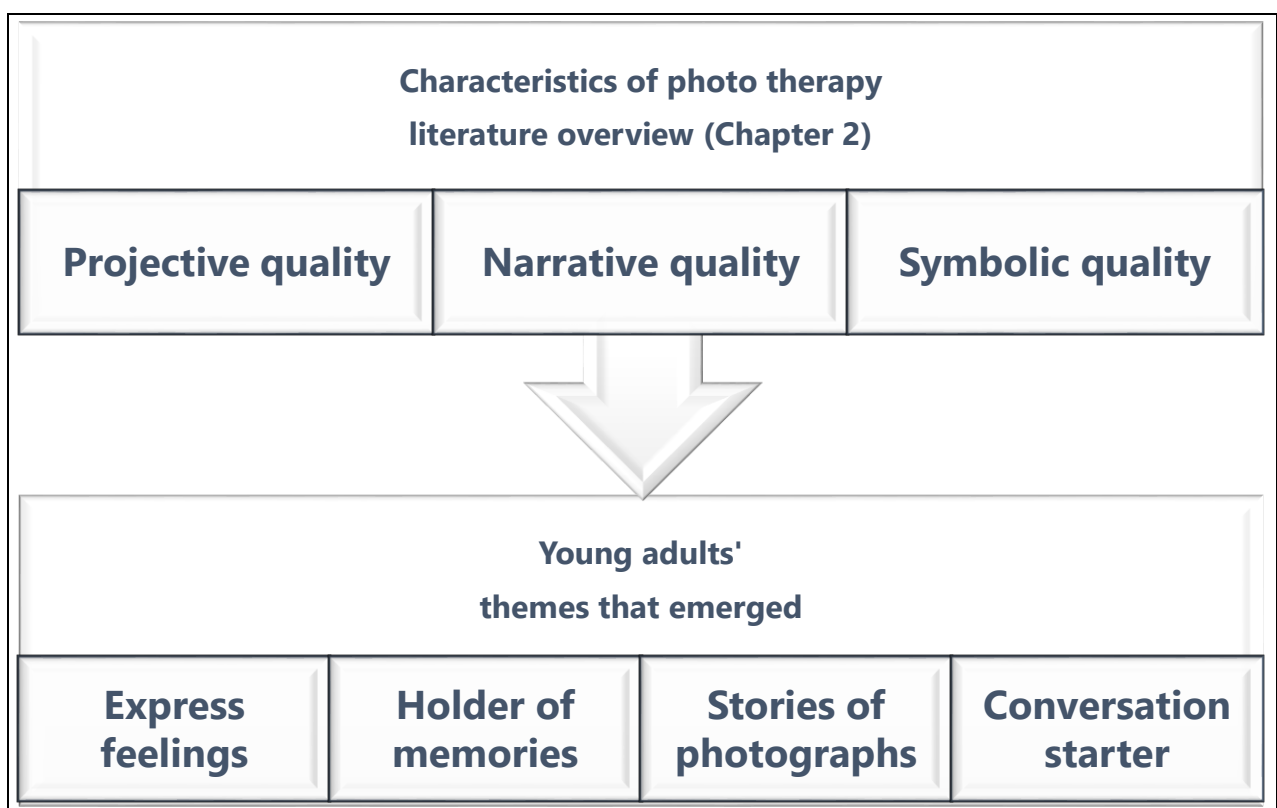
**Diagram 6.3: Comparison of the advantages of photo therapy from the literature and the themes from the educational psychologists**

The educational psychologists, as the experts, understood the advantages of photo therapy as a requirement for the process of therapy and that photographs assisted in unlocking aspects in the unconscious mind and helped to express the emotional status of clients. The educational psychologists confirmed that the use of photographs was an extremely advantageous and non-threatening tool that would assist in the process of therapy with young adults. They realised that photographs might lead to a deeper understanding of clients' life worlds, as well as an understanding of their emotions and feelings. The photographs support both the client and the therapist in the practice of therapy, as the photographs serve as artefacts and, in the process of exploration, the

clients' own meanings or interpretations come to light. All these advantages of photographs lead to a deep understanding of the clients and, therefore, assist in the therapeutic process.

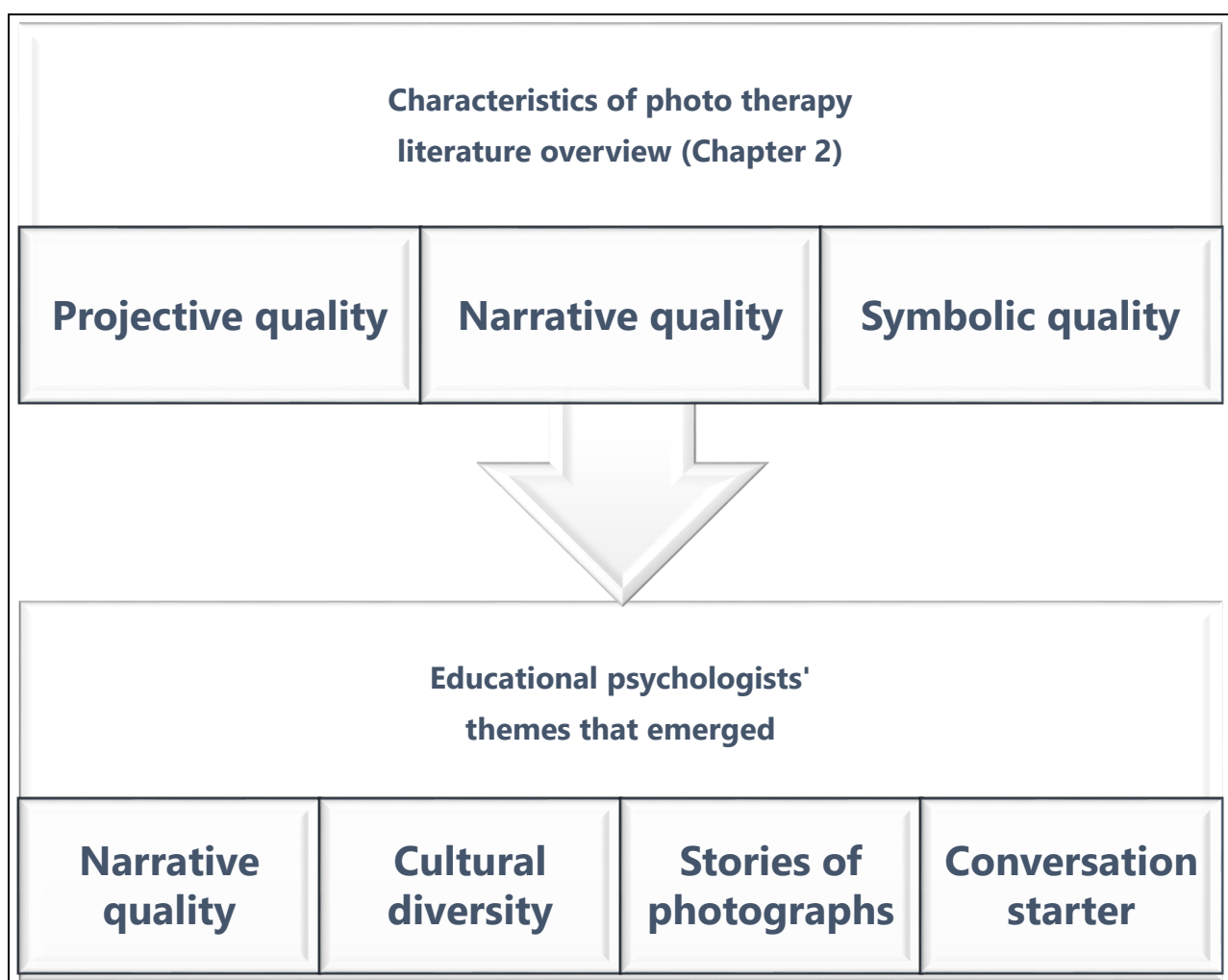
### 6.2.2 Characteristics of photo therapy

In Chapter 2, Section 2.6, the characteristics of photo therapy – the projective quality, narrative quality and symbolic quality – were discussed. The projective quality assists in unlocking the unconscious (Loewenthal, 2013:9). The narrative quality of the photographs was explored, as photographs capture a specific story (Kopytin, 2004:49; Rossi, 2009:11; Shechtman & Tsegahun, 2004:368; Weiser, 2004:23). In the exploration of the photographs in a therapeutic process, with a trained mental health worker, the narrative quality could assist in unlocking the story and understanding the deeper meaning behind issues.



**Diagram 6.4: Comparison of the characteristics of photo therapy from the literature and the themes from young adults**

The young adults commented on the narrative quality of the photographs – they understood that the photographs conveyed stories and that the photographs were holders of memories. They realised that in that moment in which the photographs were captured, they also captured the memories, and exploring these memories might lead to a better understanding thereof.



**Diagram 6.5: Comparison of the characteristics of photo therapy from the literature and the themes from educational psychologists**

The educational psychologists commented on the narrative quality of the photographs – as each photograph tells a story that can be related to the individual’s life, the photographs make it easier for clients to express their stories. Photographs are culture-

sensitive, as photographs capture the embedded beliefs of communities and the projective qualities of their own worlds. Photographs further have the effect that people project their feelings and emotions onto the photographs. In the process of therapy with photographs, the client and the therapist explore these stories and this leads to a better therapeutic understanding. In the South African multicultural society, photo therapy can assist in gaining a better understanding of people, as clients and therapist can 'see' the clients' life worlds in a more concrete way. Photographs assist in a multicultural setting, as the photographs and the stories embedded in the photographs lead to a better understanding of the clients and their experiences.

The therapy process may be difficult for some clients. Photographs can assist in creating a positive therapeutic environment for these clients. The therapist and the client use objects that are 'understandable' for the client, namely his or her own photographs.

### **6.3 Findings that do not correspond with the literature**

In this section, I examined my findings in terms of how they diverged from what is currently reported in the literature, and how my study contributed to a new understanding. In general, the findings correlated with the literature – not many unexpected findings have come to the fore. The findings that stood out are that the electronic and digital aspects of photo therapy have not been researched widely, and that many of the findings of the study are from case studies, which make it difficult to generalise findings on the use of photo therapy. In most cases, the therapists' own experience in the field and feedback from clients show that photo therapy is an effective tool to be utilised for the therapist who likes to 'do therapy' in a creative way.

The newly developed photo therapy tool endeavoured to develop an electronic photo therapy tool for use within the South African context. The other applications of photo therapy served as inspiration and some of the aspects were incorporated in the new

process. These applications showed that not many South African therapists were utilising photo therapy as a therapeutic tool, and therefore the newly developed photo therapy tool filled a gap in that it created an electronic format for use in the South African context.

The following themes emerged from the study of the photo therapy tool:

- Modern
- Relevant
- New and fresh
- Electronic medium
- Versatile
- Multicultural
- Tolerant
- Culture-friendly
- Expressive tool
- Helps in the therapeutic process

#### **6.4 Answering the research questions**

I attempted to develop and design a photo therapy tool. In the evaluation process, I attempted to understand the participants' perspectives and opinions of the tool and to further improve the photo therapy tool so that it could be used by educational psychologists in their practice with clients.

In an attempt to answer the primary research question, the sub-questions need to be answered and by doing so, the primary question was answered.

### **1. What are the perceptions of educational psychologists on the newly developed photo therapy tool?**

I conducted an empirical research and compared the findings to the literature study. I determined that the photo therapy tool connected to the literature and that it also connected to the utilisation of photographs to further assist in the therapeutic process with clients. The photographs assisted in an easier and a freer expression of feelings. The educational psychologists also suggested improvements, which were incorporated into the photo therapy tool. As previously mentioned, the developmental intervention research design is an interactive method and will continuously develop and improve as the photo therapy tool is being utilised in practice.

### **2. What are the perceptions of young adults on the newly developed photo therapy tool?**

I conducted an empirical research and linked the findings to the literature study. I determined that the photo therapy tool connected to the literature and that it also connected to the fact that the utilisation of photographs assisted the clients to feel more relaxed and made it easier to focus on the photographs. The young adults could relate to the photo therapy tool as meaningful and they liked the modern way of presenting it. They also suggested improvements that were incorporated into the photo therapy tool.

### **3. How do educational psychologists experience the usefulness of the newly developed photo therapy tool as a strategy of intervention?**

The following photographs represent the perceptions of the usefulness of the photo therapy tool of some of the educational psychologist participants:





*"The photo therapy tool is like a flower that slowly opens up and reveals its beauty. The photo therapy tool assists the educational psychologist to slowly and gently open up clients, feelings and emotions."*

**Photograph 6.1: An educational psychologist's representation of the usefulness of the photo therapy tool**



*"The photo therapy tool is like a comfortable chair it makes clients feel at home and helps in the process to create a good therapeutic relationship with clients."*

**Photograph 6.2: An educational psychologist's representation of the usefulness of the photo therapy tool**



*"The photo therapy tool is like this giraffe it provides a 'better view', a new perspective to issues. I had a micro perspective and the photo therapy tool gave me a macro perspective."*

**Photograph 6.3: An educational psychologist's representation of the usefulness of the photo therapy tool**

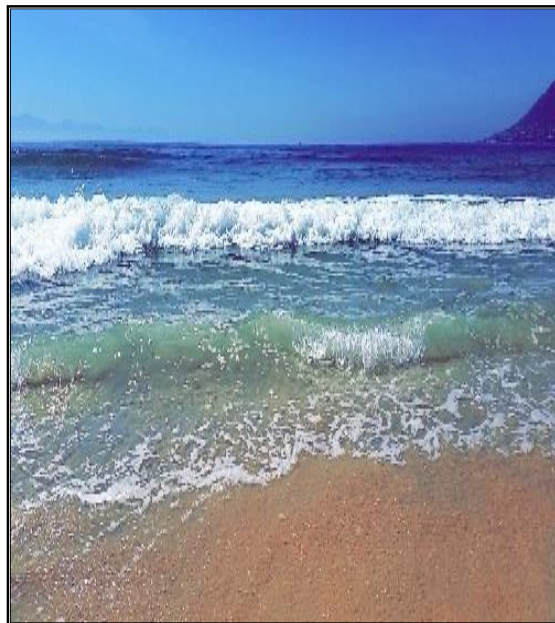


*"The use of photo therapy nurtures the wellbeing of clients."*

**Photograph 6.4: An educational psychologist's representation of the usefulness of the photo therapy tool**

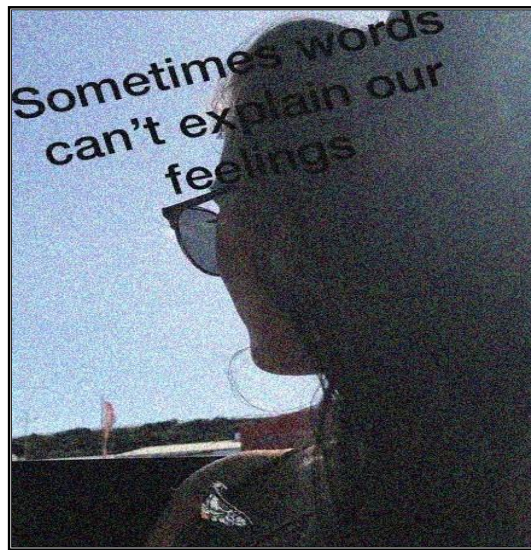
**4. How did the young adults experience the usefulness of the newly developed photo therapy tool as a strategy of intervention?**

The following photographs represent the young adults' ideas on the usefulness of the photo therapy tool.



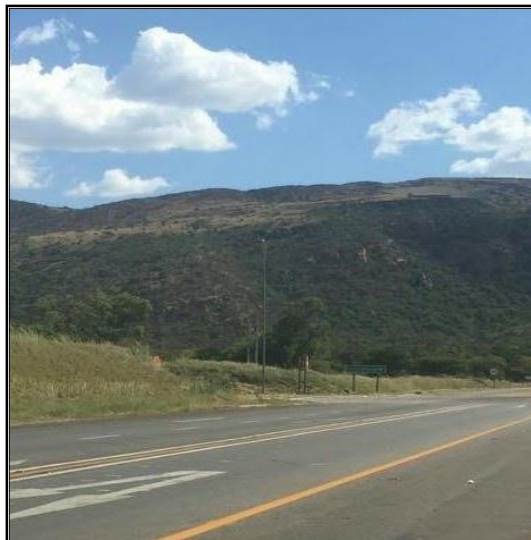
*"The photo therapy tool helps me to focus on difficult aspects, and place all the difficulties behind me, that I can look towards the future."*

**Photograph 6.5: A young adult's representation of the usefulness of the photo therapy tool**



*"One picture is worth a thousand feelings and words."*

**Photograph 6.6: A young adult's representation of the usefulness of the photo therapy tool**



*"The photo therapy tool is an open road to self-expression and self-discovery"*

**Photograph 6.7: A young adult's representation of the usefulness of the photo therapy tool**

The following research question was proposed for the study in Chapter 1, Section 1.5:

**Can a photo therapy therapeutic tool be designed and developed for educational psychologists within the South African context?**

The photo therapy tool was developed according to the process of the developmental intervention method. The specified focus of this method is on the development of interventions to assist with identified issues.

The photo therapy tool is suitable within the South African context for educational psychologists who utilise creative therapies to assist in the therapeutic process. Educational psychologists can use any theoretical framework with the photo therapy tool and in a wide variety of fields, for example career guidance, grief counselling and brief therapy. The photo therapy tool can be useful and can be utilised by educational psychologists in the South African diverse society as in the process of development (see Chapter 4), the research attempted to create the photo therapy tool, especially considering the South African society. The primary focus of this study was the development of the electronic photo therapy tool to contribute to the use of photo therapy in the modern world and also in the South African context.

## **6.5 Final reflection of findings**

The journey of this research started with the idea of creating a therapeutic tool based on the utilisation of photo therapy techniques. In private practice with my clients, I used photo therapy techniques as an adjunctive to verbal therapy. The photograph, in therapy, serves a valuable function and assists in the therapeutic process in addition to creating a safe environment for clients to express feelings, memories and emotions

that are arduous to express. Photo therapy seemed a logical choice for a research interest, as I had worked in this way with clients in therapy and had come to the realisation that it was a tool that worked well in my own approach to clients and that most clients responded well to the use of photographs. Photographs are an easy medium, as taking photographs are becoming an everyday activity for most people.

I furthermore speculated that young adults were increasingly expressing themselves on social media via photos. Photographs were becoming a communicative media, but for the educational psychologists, the meanings constructed from these social artefacts were of the utmost importance. The meanings behind the photographs were being explored by therapists and clients to co-construct the meaning thereof, and illuminate aspects that needed to be 'worked through'. To a greater extent, clients brought their photographs to therapy sessions on smartphones rather than albums; even the more disadvantaged clients had some photographs on their cell phones. I thereafter considered the possibility of creating a therapeutic tool that was more user-friendly and accessible to a generation that were more inclined to use technology.

In my work as an educational psychologist, I became frustrated with projective tests and other media that felt outdated and did not reflect the society of today. The media and therapeutic tools used by educational psychologists seemed not to consider the diversity of the South African society and came over as being archaic. South Africa is still in the process of creating a new identity as a young democratic country, and I felt that many of the therapeutic tools available for professionals did not reflect the reality of contemporary South Africa. The country was multicultural, with an array of cultures and languages; this created a challenging therapeutic environment and it was a difficult task to reflect this multileveled social reality, but as we are socially embedded, it influenced the constructions of our life worlds. I was consequently contemplating the development of a therapeutic tool that could be used and reflected the life world of South Africans.

The above reflects the ideals that started the process of the development of the photo therapy tool; these aspects shaped and directed the process of development. I wanted a practical tool that could be utilised by educational psychologists to assist in the process of therapy. I wanted the tool to be modern and practical to contribute in some way to the practice, so that more educational psychologists would be using photo therapy in their practices with clients, as prescribed by the Health Professional Council of South Africa. I aspired to contribute to the development of a practical electronic therapeutic tool that could make therapy less threatening to clients.

The aim of the study was the development of a therapeutic tool with the following main aspects as crucial points:

- 🕒 Photo therapy as core theme
- 🕒 Electronic format as a practical implementation
- 🕒 Multicultural, to reflect the context that the study was embedded in
- 🕒 South Africa as the main focus sphere
- 🕒 Modern, to emphasise the reality of the here and now

I therefore started the journey by developing a photo therapy therapeutic tool for the use of educational psychologists and to evaluate the photo therapy tool in order to appreciate if the tool would be useful as an intervention strategy for educational psychologists and if young adults could relate to the photo therapy tool.

The literature study in Chapter 2 guided the process of the different photo therapies and the different applications of photo therapy, as my focus was on photo therapy. I understood that the tool was in fact beneficial in therapy with clients, as I had previously done research in my master's studies on the use of photo therapy. I knew

from my own experience that photo therapy worked, and that clients responded to the use of personal photographs in the course of therapy. I based the created photographic albums on those of the pioneer in the field, namely Judy Weiser's five techniques (Weiser, 2001), although I adapted and changed the albums into an electronic interactive format. Clients were then able to download photographs directly into these created albums, and could change or embellish them and express the meanings behind the photographs.

The second step was to understand if the idea of creating an electronic platform was achievable and practical. For this process, software developers were approached to see if the idea of creating a platform where clients could download, manipulate and create photographs, was a possibility. The software developer developed a photo therapy tool with which clients could create albums and download and change photographs. The development of the new photo therapy tool in an electronic format seemed a possibility.

Thirdly, I wanted the photo therapy tool to be multicultural as South Africa has a diversity of people and as educational psychologists, we are exposed to a variety of clients. I wanted clients to recognise themselves in the used media, as the media in use did not always reflect the diversity of South Africa. This was a mammoth task, as it was extremely difficult to reflect all the aspects of all people. For that reason, I endeavoured that at least most of the people would feel that at least some aspects reflected their life worlds. In this process, I have spoken informally to as many young people as possible to attempt to understand their world. (I understand that it is almost impossible to cover and understand all the diversity and life world issues, but it can be added on in future as the photo therapy tool develops. During my career and the time I have spent with clients in multicultural settings, some of the diversity questions addressed came to the fore.)



Fourthly, I wanted the therapeutic tool to be South African in nature (not to say that the same principles cannot be used in other countries, but it was of the utmost importance that the tool reflects our South Africanism). As an educational psychologist, I understood that there were challenges regarding mental health in South Africa (see Chapter 1, Section 1.2). More professionals are needed to take care of the wellness of society, and mental health issues need to be addressed more appropriately and with more sincerity. Mental health is in a crisis state as our societies' need for care in this area grows on a daily basis. It was, therefore, important for me to make a contribution to our mental health challenges in a South African way that presents the society, thereby creating a tool that South Africans can relate to and that also contributes to educational psychologists using more appropriate media to understand the diverse needs of clients.

Fifthly, I wanted the photo therapy tool to be new and modern, as some of the media used by psychologists were old-fashioned and often did not reflect society as we see it today. I wanted the tool to be fresh and modern, so that young people could relate to the tool and that educational psychologists using the tool would find it easy to access and an interesting way to work with clients.

These were the facets that influenced and guided the process of the development of the photo therapy tool. The development was an extended process and the developmental intervention design guided the development in steps (see Chapter 3, Section 3.4). The different role-players assisted in the co-construction of the different aspect that needed consideration. Their valuable contributions are noteworthy. The electronic tool could be developed with the different photo therapy applications in mind and did, in fact, serve to some extent as an inspiration of aspects of the photo therapy tool (see Chapter 2, Section 2.7). The final findings suggested that the application of photo therapy as a therapeutic technique seemed to be as follows:

- Photo therapy could serve in the practice of therapy as a conversation instigator between the therapist and the client.
- The photographs were holders of memories; as precious artefacts, the stories were embedded and kept locked away in the mind, until the therapist and the client explored these memories, stories, feelings and emotions.
- The photograph in the therapeutic setting made it possible to express feelings and bring the unconscious to the conscious mind. In a safe therapeutic setting, the therapist and the client could work on therapeutic aspects using photographs.
- Photographs contributed to the possibility of a deeper expression of emotions; clients felt comfortable to explore these deep-rooted emotions, as the focus was on the photograph and not so much on the person.
- The photo therapy tool made it possible to create personal symbols that represent clients, and these symbols could guide the therapist in understanding clients out of their frame of reference.

The electronic format of the photo therapy tool was an imperative characteristic, as I aspired that the tool could relate to a new generation. The findings of the research reflect that the photo therapy tool as an electronic application was as follows:

- The photo therapy tool seemed to be innovative, contemporary and up to date. The images and photographs used in photo therapy felt modern, and the young generation, as well as the professionals that would use the tool, would be able to associate with it.
- The electronic platform was a feature that came across as extremely appropriate for a generation that was technologically inclined. This made the photo therapy tool advantageous, as it related to the new technological life worlds of clients.
- This created a space where clients felt they were seen and heard, and where there was a representation of their life worlds, thereby giving aid to the

therapist to create a safe therapeutic space wherein the client felt he or she was understood.

South Africa is multicultural, with a vast diversity of people; this complicates therapy for the therapist. In conjunction with this multicultural setting, we have various mental health matters that are not always adequately addressed (see Chapter 1, Section 1.2). The number of professional mental health workers is insufficient, and mental health matters are on the increase in our societies. According to my observations, aspects that can contribute to mental wellness are therapeutic tools that can assist clients to reflect the truths and non-truths within these societies and which may lead to overall wellness in our communities. The following findings came to light on the multicultural flavour of the newly developed photo therapy tool:

- In general, the tool reflected our diverse society and clients could 'see' themselves or 'see' some aspects of the self in the photo therapy tool.
- In the presentation of the photo therapy tool, the user-friendliness of the tool was highlighted and people felt it reflected their true life worlds and it is usable in a multicultural setting.
- The advantage of the photo therapy tool was that clients could load their own personal and favourite photographs onto the tool. It was, therefore, user-friendly, client-directed and client-created, and for that reason, the therapist had the opportunity to understand the unique life world of each client.

In Chapter 1, Section 1.7, emphasis was placed on the importance of the values of Afrocentric worldviews. It was important to attempt to conduct the research with the assistance of co-constructors. Without the insights and opinions of the participants in this study, I would not have been able to get the right fit for the South African context. The insights and opinions of the participants are as follows:

- The tool reflected South Africa and felt totally South African; therefore it could be used with a variety of clients in different therapeutic settings.
- The tool echoed in its essence the fabric of the nation; that is not to say that more aspects cannot be included in future to make it more South African. It is crucial to remember that the emphasis was on the photo therapy therapeutic tool. As the tool would be used by educational psychologists with clients, the clients would have contributed their own photographs, which would reflect themselves and the society around them. Those are the reflection aspects that would be explored in therapy with the client.

The creation of a photo therapy tool that was contemporary was a further aim, as I felt that the media used by educational psychologists seemed outdated. The photo therapy tool needed to reflect the present day, and educational psychologists, in addition to young people, should feel that the photo therapy tool was a modern and new application. If the clients could make sense of the therapy received, it would be more valuable for them and resistance to therapy would decline. The findings of the research showed that the educational psychologists and the young adults understood the value of a therapeutic tool that is current and present-day in nature –

- The newness and freshness of the tool as a modern application of a therapy tool came to light.
- The personalisation of the photo therapy tool was important, as the participants felt they could share their own feelings, thoughts, memories and emotions.
- The photo therapy tool facilitated therapy, as it was non-threatening; it made sense for clients in this date and age to be busy with photographs from their life worlds.
- The photographs became the focal point, and clients and therapists could 'see' the life world of their clients.

- The photographs were embedded with stories and if therapists explored and listened intently to clients' own narratives, the therapists would clearly understand better.

The overall findings of the study showed that the developed photo therapy tool was a useful tool for educational psychologists with a wide variety of client issues. The photo therapy tool could be utilised in a therapeutic setting, as the value of photo therapy as an intervention strategy by a trained mental health worker, with clients in a therapeutic setting, was constructive. The electronic format further contributed to the appeal of the photo therapy tool, as this format made it contemporary and modern. It helped therapists to create new and exciting ways to engage clients in an expressive way in therapy. The photo therapy tool indicated that it had the possibility to be employed in diverse multicultural backgrounds, and that many people would 'see' themselves in the tool. South Africans would 'see' themselves reflected in the photo therapy tool and in the process of therapy, they would be able to further explain and explore their feelings, emotions, memories, stories and life worlds.

The findings suggested that the photo therapy tool was new and modern, and that people could connect and interrelate with the photo therapy tool. The findings of the study showed promising possibilities of a therapeutic photo therapy tool that could be used with clients in a therapeutic environment. This tool might contribute to the new tool to be used in therapy with clients and the tool indicated glimpses of our worlds. Both therapists and clients could co-construct meanings to these and this could precede to improve clients' overall mental wellness.

## **6.6 Conclusion of the findings**

From the discussion above it becomes evident that the photo therapy tool was perceived as a valuable therapeutic tool in the South African context. The photo therapy tool can be applied by educational psychologists in therapy with young adults

in a variety of therapeutic issues and from their own theoretical framework. The educational psychologists and young adults also realised the value of the newly developed photo therapy tool, in that it is modern and a new way of therapy they could relate to. They connected well to the content of the photo therapy tool as being South African in nature and reflecting the South African diversity.

This photo therapy tool will not be suitable for all professional psychologists (it will depend on each educational psychologist's approach to therapy), but will be useful for educational psychologists who enjoy working in expressive ways, and those who are keen on exploring alternative methods to create a positive therapeutic environment.



**Diagram 7.1: Overview of Chapter 7**

## **CHAPTER 7: SUMMARY AND RECOMMENDATIONS**

*"Sometimes the questions are complicated and the answers are simple." Dr Seuss*

### **7.1 Introduction**

The research aim that guided this research, was the development of a photo therapy tool. The study was undertaken to develop a photo therapy tool within the South African context. The literature study assisted in understanding photo therapy as a therapeutic tool with clients in a therapeutic setting. The developmental intervention research design guided the process of the development of the photo therapy tool.

### **7.2 Personal reflections**

#### **7.2.1 Critical findings**

- The successful development of a photo therapy tool that can conceivably be used by educational psychologist as an intervention strategy.
- The usefulness of the photo therapy tool for educational psychologist in practice.
- The impact of the photo therapy tool on educational psychologists; the young adults deemed it a useful tool in psychotherapy.
- Contribution to theory through the value of photo therapy is that the development of the tool contributed to the theory of photo therapy as an intervention method.

#### **7.2.2 Findings I expected**

- I expected that the photo therapy tool would be valuable, as in my experience as an educational psychologist and in dealing with photo therapy, I came to experience it as a constructive tool with clients in therapy, as photographs are an easily assessable, non-threatening way to assist therapists in the therapeutic process.



- I expected that most of the educational psychologists would concur on the constructiveness of the therapeutic tool, as most psychologists are open to new ideas and experiences and in the further development of their profession, especially educational psychologists who use expressive techniques in their approach of clients. (The selection criteria for participants – educational psychologists – were the use and understanding of expressive therapies. It is therefore understandable that they would perceive the photo therapy tool as valuable, as they were working in this field.)
- I further presumed that most young adults would relate to an electronic and photo-based tool, as it seems that photographs, as a way of communication, are prevalent.
- I was also of the opinion that the photo therapy tool would be useful in a multicultural environment within South Africa, as photographs can express a variety of meanings. The projective quality of photographs assisted with contributing to different interpretations and narratives.

Table 7.1 provides a summary of the assumptions that were stated in Chapter 1, Section 1.5, as well as comments obtained from the literature study and the empirical study.

**Table 7.1: Summary of the assumptions of the study**

<b>Assumptions</b>	<b>Conclusions</b>
The newly developed photo therapy tool would be evaluated by educational psychologists and young adults, as a constructive therapeutic tool to be used in the diverse and multicultural domain of the South African context.	The photo therapy tool was seen as a useful tool by the educational psychologists and the young adults, as most of them felt it reflects the South African context and that it is a tool they would consider using.

<p>The nature of the developmental intervention method is focused on the development process, therefore implying that it would be an ongoing process. The newly developed photo therapy tool will be updated as our life world changes, especially that of the South African society being in the midst of development and change all the time.</p>	<p>The photo therapy tool would continuously improve and change, as the tool would be used in practice. The context constantly changes; therefore, the tool would be continuously updated.</p>
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### 7.2.3 Findings I did not expect

I did not expect the young adults' insight into the advantages and characteristics of the photo therapy tool. I found that they showed emotional intelligence in the process, as well as in the value of therapy and the use of expressiveness in the therapeutic environment.

### 7.3 Limitations of the study

The following limitations are applicable to the study:

- Consultation with more role-players could have assisted in a more finely tuned photo therapy tool.
- The outcome might have been more trustworthy with a bigger sample of participants. No generalisations can therefore be made, but the findings imply that the photo therapy tool may be a useful therapeutic tool.
- The focus of the study was the development of the photo therapy tool. This was a tremendously time-consuming process; consequently, the application of the photo therapy tool in practice was not done.

## **7.4 Recommendations**

The initially stated central aim of this research was to develop a photo therapy tool for educational psychologists within the South African context. Though recognising the limitations of the study, I largely achieved the principal aim of developing a photo therapy tool for educational psychologists, thereby contributing to the knowledge base of the field of photo therapy. The photo therapy tool revealed that it could be utilised in the South African therapeutic setting, as it considered the diverse settings the educational psychologist may encounter. The research showed that there were gaps in knowledge about photo therapy as a therapeutic intervention strategy, especially in the South African context. The application of photo therapy in modern society, with numerous utilisations of photographs in modern society, needs to be considered, and new research in this field should be done. The benefit from further research is the pragmatic evaluation of the photo therapy tool in practice:

- I would recommend that further research on the application of the tool in practice should be done to further refine the tool.
- Further research to apply the principles of the newly developed photo therapy tool in diverse multicultural settings is also recommended.

## **7.4 Contributions**

### **7.4.1 Contribution to theory**

- I was able to theorise on the value of providing a photo therapy tool to be utilised by young adults in a therapeutic setting.
- A new application in the use of photo therapy was developed. The electronically interactive platform of the photo therapy tool made it more modern and applicable to a younger generation (and maybe to other generations as well).
- Knowledge of the utilisation of photo therapy in a therapeutic setting with a trained mental health worker was explored to bring further understanding

in this field, especially contributing to the use of photo therapy in the South African society.

#### **7.4.2 Contribution to practice**

- A photo therapy tool was developed in electronic format, to be used by educational psychologists with young adults in a therapeutic setting
- The photo therapy tool can be used by educational psychologists with a variety of clients, as the photo therapy tool had been developed to consider the diversity of the South African society.
- The photo therapy tool has the ability to include own photographs and meanings, thereby making it extremely user-friendly.
- The photo therapy tool can be used with an array of theoretical frameworks of therapists and with different problems and issues.

#### **7.5 Conclusion**

The development of the photo therapy tool was a journey that began with my postgraduate studies in educational psychology and the discovering of photo therapy as a therapeutic tool for use with clients. In my master's study, I recognised that it was a tool that I would personally like to use with clients. Later in practice, I came to the realisation that clients also found its expressiveness to be a constructive way to open up and talk about issues. The development of the electronic photo therapy tool as a modern and a unique South African tool was the aim for this research. The development of an electronic photo therapy tool was important to apply the usefulness of photo therapy in a modern and new way. The programme was constructed with the input and insight of participants and other role-players to encompass my values of the Afrocentric framework (see Chapter 1, Section 1.7). I endeavoured in the process of development to abide to the following: Ukweli – in that photo therapy attempts to represent the truth of peoples' experiences; Maelewanos – that the community of educational psychologists, young adults and other role-players

were co-constructors in the development of the photo therapy tool and without their valuable insights and opinions, the photo therapy tool would not have been developed; Akiba Uhaki – with the photo therapy tool, my aim was to style a photo therapy tool that was culture-friendly and took a diverse selection of clients into consideration to be assisted with the photo therapy tool; Ujamaas – the photo therapy tool attempted to benefit the South African diverse community, and had the ability to address the mental health issues in our communities; and Kujitoa – I attempted to abide by ethical standards and treated all the participants with dignity and respect, as they were co-constructors in the development process of the photo therapy tool. *Thina simunye ngoba abanye* – we are one because of others.



**Photograph 7.1: The researcher's own symbolic photograph on the development of the photo therapy tool**

Photograph 7.1 concludes this study with my own symbolic photograph on the development of the photo therapy tool. The water symbolises life, therapeutic understandings, growth and the development of the tool – the insight and wisdom of the participants watered the development of the photo therapy tool.

*Ek verdwaal deesdae so dikwels  
in die blaaie van my boek  
soek die sleutel van my hart onder die stof  
in my pelgrimstog na gister  
blaaie my wisselstroomgemoed  
deur die ou bekende name in my boek*

*My kiekies bring vertroosting  
as die toekoms my kom soek  
in my halfgeboude droomkasteel vanaand  
daar is net een probleem met kiekies  
en die gom van plakdriehoekies  
want die gapings tussen kiekies  
maak my bang*

*(Lucas Maree – Kiekies)*

*I get lost so often  
in the pages of my book*

*searching for the key of my heart under the dust*

*in my pilgrimage after yesterday*

*scroll my alternating mood*

*by the old names in my book*

*My pics bring comfort*

*if the future is coming for me*

*in my half-built dream castle tonight*

*There is only one problem with pics*

*and the glue of sticky triangles*

*because the gaps between pics*

*frighten me*

*(translation: Lucas Maree – Kiekies)*



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December 2016.

## **ANNEXURE A**

### **CONSENT FORM – YOUNG ADULTS**

#### **DEAR PARTICIPANT**

I am Wanda van der Merwe from the University of South Africa, researching a photo therapy tool. My study title is **The development of a photo therapy tool for educational psychologists within the South African context**. The supervisor of my DEd (Psychology of Education) research is Professor HE Roets.

#### **A. CONSENT TO BE A RESEARCH PARTICIPANT**

I would like to invite you to give consent and participate in my research. The views and opinions of young adults are important in the research. My aim is to develop a therapeutic tool for South African users to be utilised by educational psychologists. Your informed consent is an ethical requirement. I would like you to please read the following information.

#### **B. PURPOSE OF THE STUDY**

The photographs in the photo therapy tool help people to express that which is sometimes difficult to say. The photographs help therapists and clients in understanding their life world. The aim of my study is the development of a photo therapy tool within a South African context to help in the therapy process.

#### **C. PROCEDURES**

The invitation to be part of the developmental phase is given because I need the opinions of young adults to develop the ideas of the photo therapy tool. I received

your telephone number from a previous participant. I am seeking participants who meet the following criteria:

- Young adults between the ages of 18 to 25 years. Young South Africans from different races and languages to reflect the people of South Africa.
- Willingness to participate in the study.

If you agree to participate in this part of the study, you will be expected to participate in a focus group discussion. In the focus group discussion, you will give your opinion and views on the photo therapy tool with the other participants.

#### **D. RISKS OR DISCOMFORTS**

There is almost always risk involved when one participates in research, but minimal risk will be experienced, as you will only discuss your opinion and views of the newly developed photo therapy tool. In order to protect your identity and other sensitive information, no names or identities will be used in any publication resulting from this study. Each participant will receive a unique number so that anonymity and confidentiality are ensured. All sensitive information that may come to the fore will be secured by storing it on a password-protected computer. If you feel any discomfort, you are welcome to phone the researcher up to two weeks after completion of the focus group.

#### **E. BENEFITS**

Participating in this component of the research may not benefit you directly, but it will contribute to developing a photo therapy tool that can hopefully result in new photo therapy tool for use of educational psychologists in the South African context.

#### **F. PAYMENT**

There is no monetary benefit attached to participation.

## **G. QUESTIONS**

You are welcome to ask the researcher any questions before giving assent.

## **H. CONTACT DETAILS OF THE RESEARCHER**

I can be contacted at:

Telephone number:

E-mail:

## **I. FEEDBACK OF FINDINGS**

The findings of the research will be published in my thesis and other publications resulting from the research.

## **J. PARTICIPATION IN THIS RESEARCH IS VOLUNTARY**

You are free to decline to be part of this study, or to withdraw at any point, even after you have given assent.

If you are willing to participate, you are requested to sign below:

I, \_\_\_\_\_ (name & surname) hereby voluntarily consent to participate in the above-mentioned study.

- I am not coerced in any way to participate and I understand that I can withdraw my consent at any time.
- I understand my identity will not be disclosed to anybody not involved in the study.
- Information will be kept confidential (see limits to confidentiality)
- I agree to the confidentiality agreement, as set out (see Confidentiality Agreement).
- I also understand that I may benefit from participation, that there are possible risks and should I need further information, I can contact the researcher.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of the participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of the researcher

### **CONFIDENTIALITY AGREEMENT: YOUNG ADULTS**

The product, and the ideas and concepts regarding its manufacture, marketing, use, and the discussions here represent confidential information of this developmental phase.

Prior to beginning the study, please read and acknowledge your adherence to the following confidentiality agreement due to the sensitive nature of the various concepts or ideas presented in this research study.

By signing this agreement, you agree as follows:

- i. I hereby agree to keep all information about the developmental phase, including all concepts and ideas being presented and discussed, completely confidential and further agree not to disclose such information to any other party, or members of my household. I agree that they are also under this same obligation of confidentiality.
- ii. The photo therapy tool to be shown to you, described to you, and/or used by you, are highly confidential and the property of the researcher, and you will not give information of the photo therapy Tool to any other parties.
- iii. The photo therapy tool shown to you, described to you, and/or used by you, is not available for sale and no offer of sale is being made to you.



- iv. Any ideas, patentable or not patentable, or suggestions contributed by you during the discussion, as well as any ideas, developments, or inventions conceived by you as a result of your participation in the discussion, shall be the property of the researcher and may be used in any manner she sees fit.
- v. You will not be paid for your participation today. You agree to this, which includes your agreement to abide by all terms set forth in this Confidentiality Agreement.
- vi. I acknowledge that no compensation will be paid by the researcher of this study or any third party to me or any other person on my behalf with respect to use of my images. I understand that these tapes or reproductions may be used by the researcher for this study and publications resulting from the researcher, also without compensation by the researcher of this study or any third party.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of the participant

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of the researcher

## **ANNEXURE B**

### **CONSENT FORM – EDUCATIONAL PSYCHOLOGISTS**

#### **DEAR PARTICIPANT**

I am Wanda van der Merwe from the University of South Africa, researching a photo therapy tool. My study title is **The Development of a photo therapy tool for educational psychologists within the South African context**. The supervisor of my DEd (Psychology of Education) research is Professor HE Roets.

#### **A. CONSENT TO BE A RESEARCH PARTICIPANT**

I would like to invite you to give consent and participate in my research. The views and opinions of educational psychologists are important in the research. My aim is to develop a therapeutic tool for South African users to be utilised by educational psychologists. Your informed consent is an ethical requirement. I would like you to please read the following information.

#### **B. PURPOSE OF THE STUDY**

The photographs in the photo therapy tool help people to express that which is sometimes difficult to say. The photographs help therapists and clients in understanding their life world. The aim of my study is the development of a photo therapy tool within a South African context to help in the therapy process.

#### **C. PROCEDURES: FOR THE DEVELOPMENTAL PHASE**

The invitation to be part of the developmental phase is given because I need the opinions of educational psychologists to develop the ideas of the photo therapy tool.

I received your telephone number from a previous participant. I am seeking participants who meet the following criteria:

- Educational psychologists that are registered at the Health Professionals Council of South Africa.
- Educational psychologists working (who have experience) in multicultural therapy with clients.
- Knowledge, interest and understanding of Jung and his symbols.
- Knowledge, interest and understanding of expressive therapies.
- Willingness on the side of the selected educational psychologists to participate in the study.

If you agree to participate in this part of the study, you will be expected to participate in a focus group discussion. In the focus group discussion, you will give your opinion and views on the photo therapy tool with other participants.

#### **D. RISKS OR DISCOMFORTS**

There is almost always risk involved when one participates in research, but minimal risk will be experienced, as you will just discuss your opinion and views of the newly developed photo therapy tool. In order to protect your identity and other sensitive information, no names or identities will be used in any publication resulting from this study. Each participant will receive a unique number so that anonymity and confidentiality are ensured. All sensitive information that may come to the fore will be secured by storing it on a password-protected computer. If you feel any discomfort, you are welcome to contact the researcher up to two weeks after completion of the focus group.

## **E. BENEFITS**

Participating in this component of the research may not benefit you directly, but it will contribute to developing a photo therapy tool that can hopefully result in a new photo therapy tool for use in the South African context.

## **F. PAYMENT**

There is no monetary benefit attached to participation.

## **G. QUESTIONS**

You are welcome to ask the researcher any questions before giving assent.

## **H. CONTACT DETAILS OF THE RESEARCHER**

I can be contacted at:

Telephone number:

E-mail:

## **I. FEEDBACK OF FINDINGS**

The findings of the research will be published in my thesis and other publications resulting from the research.

## **J. PARTICIPATION IN THIS RESEARCH IS VOLUNTARY.**

You are free to decline to be part of this study, or to withdraw at any point, even after you have given assent.

If you are willing to participate, you are requested to sign below:

I, \_\_\_\_\_ (name & surname) hereby voluntarily consent to participate in the above-mentioned study.

- 🗣️ I am not coerced in any way to participate and I understand that I can withdraw my consent at any time.
- 🗣️ I understand my identity will not be disclosed to anybody not involved in the study.
- 🗣️ Information will be kept confidential (see limits to confidentiality).
- 🗣️ I agree to the confidentiality agreement, as set out (see Confidentiality Agreement).
- 🗣️ I also understand that I may benefit from participation, that there are possible risks and should I need further information, I can contact the researcher.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of the participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of the researcher

### **CONFIDENTIALITY AGREEMENT: EDUCATIONAL PSYCHOLOGISTS**

The product, and the ideas and concepts regarding its manufacture, marketing, use, and the discussions here represent confidential information of this developmental phase.

Prior to beginning the study, please read and acknowledge your adherence to the following confidentiality agreement due to the sensitive nature of the various concepts or ideas presented in this research study.

By signing this agreement, you agree as follows:

- i. I hereby agree to keep all information about the developmental phase, including all concepts and ideas being presented and discussed, completely confidential and further agree not to disclose such information to any other party, or members of my household. I agree that they are also under this same obligation of confidentiality.
- ii. The photo therapy tool to be shown to you, described to you, and/or used by you, is highly confidential and the property of the researcher, and you will not give information of the photo therapy tool to any other parties.
- iii. The photo therapy tool shown to you, described to you, and/or used by you, is not available for sale and no offer for sale is being made to you.
- iv. Any ideas, patentable or not patentable, or suggestions contributed by you during the discussion, as well as any ideas, developments, or inventions conceived by you as a result of your participation in the discussion, shall be the property of the researcher and may be used in any manner she sees fit.
- v. You will not be paid for your participation today. You agree to this, which includes your agreement to abide by all terms set forth in this Confidentiality Agreement.
- vi. I acknowledge that no compensation will be paid by the researcher of this study or any third party to me or any other person on my behalf with respect to use of my images. I understand that these tapes or reproductions may be used by the researcher for this study and publications resulting from the researcher, also without compensation by the researcher of this study or any third party.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of the participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of the researcher

## ANNEXURE C

### QUESTION ROUTE FOR FOCUS GROUP: YOUNG ADULTS

**QUESTION ROUTE FOR FOCUS GROUPS: YOUNG ADULTS**

**What is your opinion of the themes?**

**How do you feel about the stamps?**

**What is your opinion of the words (vocabulary) used?**

**How do you feel about the photographs?**

**What do you like about the photo therapy tool?**

**What do you dislike about the photo therapy tool?**

**Does it consider your (young adults') life experiences (life world)?**

**Do you think the photo therapy tool is race-, religion- and culture-friendly? Does it reflect the South African context?**

**One last comment about the photo therapy tool?**

## ANNEXURE D

### QUESTION ROUTE FOR FOCUS GROUP: EDUCATIONAL PSYCHOLOGISTS

**QUESTION ROUTE FOR FOCUS GROUPS: EDUCATIONAL PSYCHOLOGISTS**

**What is your opinion of the themes?**

**How do you feel about the stamps?**

**How do you feel about the vocabulary (words)?**

**What is your opinion of the projective photographs?**

**What is your opinion of the photo albums?**

**What do you like about the photo therapy tool?**

**What do you dislike about the photo therapy tool?**

**Do you think the tool is race-, ethics- and culture-friendly? Does it reflect the South African context?**

**Does it consider your clients' life experiences?**

**Will you use the tool with clients?**

**One last comment on the photo therapy tool?**