ECOTHERAPY IN POST-CONFLICT HEALING:
A STUDY OF THE EXPERIENCES OF EX-COMBATANTS IN THE EASTERN CAPE
TOWNSHIP OF MDANSTANE

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A THESIS SUBMITTED IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTER OF SOCIAL SCIENCE (SOCIAL WORK)

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DECLARATION

I, Sifingo Mbona hereby declare that this dissertation is my original work. I have not submitted it for degree purposes at any other university and have acknowledged in the text and in a list of references at the end of the thesis, all information derived from published and unpublished work of others.

Signature

Date

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I would like to take this opportunity to express my gratitude and appreciation to the following:

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ABSTRACT

During this research project, an attempt was made to understand the role of ecotherapy as a therapeutic model in post conflict healing. The aim was to evaluate the application and significance of ecotherapy as an intervention strategy for post conflict healing for individuals who were exposed to violent encounters during the liberation struggle. Eight respondents (involved in the arms struggle) from Mdanstane Township in the Eastern Cape, were taken through a series of workshops as part of an ecotherapy healing process.

The research concluded that all the participants had suffered from some form of traumatic stress because of their exposure to violence and violent experiences. Moreover, on closer examination the situation of ex-combatants proved to be more complex and often volatile, due to the absence of social support, loss of social status, absence of economic, employment opportunities, and the dislocation from their families and communities. Subsequent to the ecotherapy intervention, a positive outlook amongst the participants was recorded. Furthermore, there was an indication of a significant increase in their sense of self-worth and personal development, which influenced the manner in which the participants viewed the world, related to their families or communities and responded to life in general. Essentially, the research findings, conclusions, and recommendations contributed towards a better understanding of ex-combatants and the value that could be derived from ecotherapy as a post conflict healing method for individuals and groups exposed to violence and trauma.
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CHAPTER ONE: INTRODUCTION

1.1. Introduction

This research project addresses the issue of the significance of ecotherapy in post-conflict healing. The motivation for this study arose from the perception that themes analogous to healing and reconciliation are supposed to be pertinent in a society that has been devastated by violence and conflict. However, these themes are often regarded as secondary matters when politicians and stakeholders facilitate development and change in a post conflict society. Often, in countries emerging from conflict, social development and change are assumed to be natural steps. The path that this development is likely to take relates to infrastructural development, where needs like clean water; proper sanitation, education, access to health services, and electricity take preference.

Kambudzi (2002) explains that because of the lack of a holistic approach to development, African countries have been caught in a cycle of violence. As a result of this, the African Union has developed a new approach to reconstruction and development in African situations. This has highlighted the need to address post conflict reconstruction and development as part of a holistic process, with activities ranging from early warning to conflict prevention, peace support operations, reconciliation, reconstruction, and mental health issues. Kambudzi (2002) notes also that mental health issues always take a backseat when talking about reconstruction and development, and these concerns are rarely considered to be of primary importance.
Mental health and similar concerns are viewed as secondary matters that individuals or groups can deal with on their own and in isolation. These are not considered as common social problems that require a holistic and communal solution. According to the World Health Organisation (WHO), the experience of a tsunami and the civil war in Sudan revealed that the disaster and conflict preparedness plans of United Nations (UN) and its member States, to meet the mental health and psychological needs of the community in these circumstances were extremely limited (Noji, 2006). This WHO report in public health consequences of disaster highlighted the need for every country, whether or not affected by destruction, to prepare a detailed plan to meet any contingent situation arising out of future man-made or natural disasters.

For Noji (2006), any neglect of psychosocial support could impair efforts of physical rehabilitation and providing psychosocial support to communities affected by disasters and violence are amongst the key components of political stability and infrastructural rehabilitation. Noji (2006) notes that pathologies relating to trauma and Post Traumatic Stress Disorder (PTSD) in disaster affected areas, and in a post-conflict society, can manifest themselves in many destructive ways. South Africa has not been immune to these circumstances, as this study will illustrate.
1.2. Statement of the problem

In Mdantsane Township and in the country in general, a large number of former combatants are affected by psychological problems such as PTSD, and other mental illnesses, as a result of their exposure to violence, and past experiences of violence. These disorders impair their ability to successfully re-integrate into civilian life (Mpahla, 1997). LeBeau (2006) suggests that ex-combatants may suffer from long-term psychological distress because of the trauma of being exposed to violence. He stated that this occurs: “because some of them had to leave their homes and schools at a very young age and live under appalling circumstances in the name of freedom, which in itself is traumatic (2006:103).”

Furthermore, challenges that came with their freedom, such as reintegration into society; living a civilian life and dealing with economic realities, generated much more psychological distress for the former combatants. According to Gear (2002), ex-combatants who suffer from post-conflict trauma are likely to report a higher rate of depression; PTSD as an ongoing emotional reactions to extreme-trauma, and suicidal thoughts. For Gear (2002) the manifested psychological symptoms affect the ability of an individual ex-combatant to function productively. Accordingly this leads to poor sleeping patterns, with the person finding it difficult to study, work, and to enjoy life or activities that once used to be pleasurable. Gear (2002) indicates that a major depressive disorder can be very disabling, preventing the individual from functioning normally and productively.
Overall, this information supports the relevance of this study to help ex-combatants deal with their violent past, through their exposure to violence and trauma, and, at the same time, to examine the use and application of ecotherapy as a relevant tool to accomplish healing from these experiences.

1.3. The South African context

Mogapi (2004) states that, owing to the peaceful nature of the transition from apartheid to democracy; South Africa is rarely understood as a post-conflict country. Consequently, the statutory programmes meant for the reintegration of former combatants into civilian society, especially former members of the liberation movement and other paramilitary groups, were poorly planned and badly executed. Because of the lack of attention to the needs of former combatants, many of them currently face various economic, social and psychological challenges.

One major factor that has impacted negatively on the social reintegration of former combatants into civilian society is the trauma they experienced during their participation in armed conflict. According to Ford (1999), the psychological impact of ex-combatants’ experiences during the struggle, combined with other social and psychological pressures they might have experienced since their return, could have affected their ability to function well within their societies. Ford (1999) explains that this trauma sometimes takes the form of nightmares, paranoia, aggression, withdrawal and antisocial behaviour. Mogapi (2004), in support of this analysis, asserts that to deal with these problems, former combatants often rely on drugs and alcohol abuse.
For Mogapi (2004) there are few, or no, services available in South Africa to deal with this problem, not only for the former combatants but for the public in general.

Ford (1999) clarifies too, that over a period of time former combatants in South Africa accepted and adapted to their new situations, while others felt overwhelmed, experiencing intense stress, and causing them to display a range of emotional, physical, behavioural, spiritual, and psychological symptoms. Those former combatants, who were able to adapt and cope, often had no empathy or understanding for those who were not able to do so, or to benefit from political positions or employment.

Gillis and Gass (1996:85) argue that the ability to cope with trauma varies amongst individuals. They state that, for ex-combatants, trauma, stress or vulnerability related to extreme poverty, health problems, the lack of recognition for their sacrifice - like joining the military structures before they had finished their schooling - has the potential to produce frustration and discontentment with the present day government.

According to Jennings (2006: 45), there is an estimated one hundred thousand ex-combatants living in South Africa. This number reflects only those ex-combatants returning from exile in foreign countries, and who were involved in guerrilla warfare with the former government of the country. However, within the country there are countless individuals who were part of the struggle and who also constitute ex-combatant populations, but who were not documented. Lamb (2006) confirms that all these individuals have been part of the liberation struggle in one way or another, and their role in the struggle was crucial.
In addition, most of these individuals were exposed to some form of violence and traumatic experiences during their involvement in the struggle. Although ex-combatants are vastly distinct in their definition and feature, for the purpose of this study, the common denominator is that none of them ever received any form of therapy or debriefing, for the traumatic experience they endured, or for the pain they had inflicted on others.

According to the Truth and Reconciliation Commission Report (1998), during the apartheid era, the African National Congress (ANC) under the banner of the United Democratic Front (UDF) formed a military wing between 1986-1992 of Self Defence Units (SDUs) to protect their communities from the attacks of the then South Africa Police (SAP), the security forces, and from the armed forces of the homelands armies. Mpahla (1997) indicates that the task of the SDUs was not only to protect the community from police and security force aggression, but also to reinforce party politics and to instil compliance within the civilians; and to achieve this they used violent means. This illustrates that those who fought in the liberation struggle may also, at certain stages, have been involved in inflicting violence and pain on others, rather than being only victims. In short, it is evident that South Africa can be described as a very distressed country because of its violent past (Gear, 2002:144). The state of violent crimes, deaths, armed robberies, domestic violence, and the culture of substance abuse is an indication of psychological distress as a result of this past, and continues to influence present conditions.
1.4. Aims and Objectives of the research

The aim of the study is to gain an understanding of the participants’ historical and contextual experiences of trauma and to assess and evaluate the effectiveness of ecotherapy in facilitating their post-conflict healing. The secondary focus was to acquire an understanding around ex-combatants’ transformation, empowerment, and reconnection processes to eventually improve their relationships with organisations, institutions, and their community with the help of ecotherapy. To achieve these aims the research employed an exploratory design. This study is an exploratory study that sought to explore and examine issues on a topic on which limited research has been undertaken. Rubin and Babbie (1993) note that the researcher utilises mainly this form of design when examining a subject matter that is relatively new and inadequately studied, as in the case of ecotherapy. The aim of the study, therefore, was to gain an understanding of the participants’ contextual experiences and to assess and evaluate the effectiveness of ecotherapy in facilitating post-conflict healing. Eight participants were taken through a series of interviews and a process of healing through ecotherapy intervention. The research project consisted of three components:

- **Component one:** Screening and pre-interviews with each respondent to assess their distress levels, and the impact of this distress on their psycho-social livelihoods as a result of their exposure to violence.
- **Component two:** Intervention through ecotherapy, in which the respondents were taken through a healing process.
Component three: Includes post interviews with each individual respondent, and discussion within a focus group context. These involved assessing the participants’ attitudes, self-concept and mental conditioning consequent to their ecotherapy intervention and their integration into their natural environment after having gone through the healing process.

It is important to note that this work is essentially about the healing, empowerment and reconnection of ex-combatants within their communities. The project sought to assist the respondents to find healing and closure from their past, and to develop new identities and roles in order to live positively. Significantly, this work is intended to serve as proof and a working document for the technical relevance and practical application of ecotherapy as a therapeutic model that can be utilised in assisting groups or individuals who suffer from traumatic experiences. It is an important step in advocating a place for this healing technique in a post conflict society in order to help individuals who have been exposed to, or are victims of some form of violence and abuse.
1.5. Summary

The overall goal of this study was to conceptualise and contextualise the integration of ex-combatants in Mdantsane Township into their community, and to assist them in developing their personal resources to obtain this reintegration. At the core of the entire study was the need to find healing and to restore the dignity of the specific ex-combatants in this study, and to provide a framework for healing for ex-combatants in general. The process of healing and transformation, as outlined in this thesis, could further help to raise awareness in Mdantsane about the feelings of ex-combatants, and provide a better understanding of this group at community level. The use of ecotherapy techniques to achieve these objectives was an integral part of this research project, and could have wider use in this community.
CHAPTER TWO: LITERATURE REVIEW

2.1. Introduction

This chapter discusses a broad range of literature relevant to this study. In particular, it reviews discourses on ecotherapy and its use in post-conflict healing. This includes literature on stress and trauma, as well as texts on ecotherapy and ecotherapy trails.

2.2. Trauma

As indicated earlier, sustained exposure to violent community conflict, armed combat, and military confrontation can leave many combatants emotionally and psychologically scarred. Circumstances of poverty, unemployment and loss of status in the community, in which many former combatants find themselves in, exacerbate their psychological pain. According to Motumi (1996:58), “trauma is an event which leaves the person feeling totally out of control and powerless.” It is usually unexpected and does not have any elements of choice. For Motumi (1996), trauma is an emotional state, or the reaction of an individual to a hazardous event rather than the event itself. Dealh (2006), states that prior to the 19th century, symptoms in combatants relating to what is now known as post traumatic stress disorders were associated with homesickness, hopelessness, nostalgia or fear.
In fact, as Dealh (2006) observes, throughout history, PTSD has been called a number of different names, like battle fatigue, gross stress reaction, and shell shock. Consequently, before the medical community recognized PTSD as a viable emotional disorder, most practitioners and doctors thought it was simply cowardice or personal weakness. In this respect, as Dealh explains, traumatic experiences are different from crises in that a crisis involves unstable and dangerous social situations regarding economic, military, personal, political, or societal affairs that involves an impending abrupt change. On the other hand, post-traumatic stress disorder is an emotional illness that develops when a person is exposed to a highly dangerous, very terrifying, possibly life-threatening event (Dealh, 2006:77). In this way, the death of an elderly loved one after a long illness may not be considered traumatic, in the sense that is discussed here, because the loss, although it can be devastating and deeply sad, is an expected life event.

In contrast, as Bloemhoff (2006) notes, the unexpected or brutal death of a colleague due to violent assault or shooting during community violence is generally considered a traumatic experience. According to The National Peace Accord Trust (2004:37) military veterans who have experienced intense trauma often suffer from the following list of symptoms:

1. Bad dreams.
2. Intrusive memories or lapse of memory.
3. Thinking about the bad experience over and over again.
4. Avoiding remembering the traumatic event.
5. Feelings of detachment.
With the history of the South African struggle it is clear that violent scenes, ambushes by security forces and burning and killing people, using graphic means (burning someone alive), may have generated many forms of psychological distress amongst the people of South Africa. To be more specific, it was the ex-combatants who had to bear the brunt of executing these traumatic actions (TRC, 1998). Moreover, in instances where ex-combatants participated in violence against others, often their victims were people they knew or people with whom they grew up and knew from an early age (TRC, 1998:79).

2.3. Trauma, conflict and ex-combatants

There were a number of conflicts that South African ex-combatants were involved in. According to the TRC report (1998) these ranged from border wars to clashes with security forces in the townships, while others remained in exile fighting at a diplomatic level. One could argue that the psychological impact of the ex-combatants’ experiences during the struggle, combined with other social and psychological pressures they may have experienced since their return, could affect their ability to function effectively within society today.

However, Lamb and Cock (2006) note that, many former fighters who carry with them decades of militarised experiences and its accompanying burdens, are expected to let go of these experiences without any form of therapeutic intervention, when they are forced to attempt to build new lives for themselves and their families. Donnison (1982) likewise indicates that, for some ex-combatants, being involved in the war meant that they were exposed to traumatic events.
The context in which they experienced these events was usually characterised by poor social support systems (away from families and friends) as well as a soldier’s mentality (fear is viewed as weakness) that saw psychological distress as a weakness, isolation, and continuous fear.

Ford (1999) further confirms that exposure to conflict and violent situations, and the lack of protective factors to deal with them, increased the risk of psychological distress and disorders such as trauma, depression, and Post Traumatic Stress Disorder (PTSD), amongst combatants.

These factors therefore would all affect the ability of ex-combatants to build new lives for themselves. In addition, upon their return from exile many ex-combatants were faced with new social and psychological stresses. These included the reintegration into a family they had not seen for a long period of time, adjustment from a soldier’s mentality and adaptation to a civilian life, poverty, unemployment, and distress caused by the expectation of family members to provide financial security while personally having to cope with their pre-existing military traumas (Jerry, 1997). As a consequence of this, ex-combatants would suffer from long-term psychological distress, which would manifest itself through some, or many, symptoms of PTSD, or through personality changes, as well as secondary or associated trauma symptoms.

For Vetten (1998) these psychological disorders are often transferred into their homes and relationships. Indeed, all these factors point towards the significance and the need to address the psychological needs of ex-combatants, for, as (Donnison, 1982:11) indicates, although some ex-combatants have recovered well, there are others who continue to suffer psychological consequences as a result of their involvement in the conflict of the country.
2.4. Ecotherapy, an approach based on our rootedness in nature and the wilderness

Ecotherapy is influenced by the notion of wholeness, or oneness in nature: that there are interconnectedness between everything, and that every organism exists in relation to other organisms, whether organic and inorganic (Glasser and Hertz, 1999:38). According to White (2002), this has tremendous value for the therapeutic intervention of the ecotherapist, as the notion of healing is closely related to the move towards wholeness. White (2002:61) clarifies that the notions of wholeness and interconnectedness are not mere constructs, but that there is solid and sound verification for these notions in nature, and as such they have a great impact on the preferred wholeness of communities, facilitating interconnectedness in communities, and emphasising the idea that everything is related, or inter-related.

Leonardo Boff (1995), a liberation theologian, reflecting on the importance of the ecological paradigm, is of the view that ecology has to do with the relation, interaction, and dialogue of all living creatures among themselves and with all that exists, and that which pre-exists. As such, everything that co-exists and pre-exists, subsists by means of an infinite web of all-inclusive relations. In a similar manner, Bennet (2003:81) observes that ecotherapy is a combination of the ideas of ecopsychology and psychotherapy. Ecopsychology places psychology and mental health disciplines in an ecological context and recognizes the links between human health, culture, and the health of the planet. Similarly, fundamental to ecotherapy is our connection to the natural world, to each other and the environment in which we live.
Ecotherapy uses a range of practices in order to help us connect with nature and ultimately with our inner nature. In ecotherapy personal distress can be alleviated by developing the mutual connection between inside and outside (McCallum, 2005). Ecotherapy is about personal healing and healing for the earth. Spending time in nature provides the space for inward reflection and the potential for transformation, as we become conscious of our interconnectivity with the world around us. How we encounter and interpret the natural world creates a personal narrative that gives meaning to our experiences and emotions (McCallum, 2005). Similarly, Boff (1995) notes that when people feel depressed, anxious, lost and alone, and are overwhelmed by their thoughts and feelings they are unable to draw upon previous ways of coping.

Ecotherapy could then be nature’s healing power, restoring the natural balance between the inner and outer person through physical connections with nature. Being in the outdoors, whether engaged in a vigorous activity such as hiking, or on a gentle stroll in the park, can improve emotional and mental wellbeing, as well as physical health. This paradigm of ecotherapy posits that personal health and healing are directly related to the health of the natural environment. Based on ideas in ecopsychology that involve the integration of psychology and ecology, ecotherapy would therefore be the application of ecopsychology to therapeutic practice.

McCallum (2005) asserts that ecotherapy encompasses a broad range of nature-based methods of psychological healing, grounded in the crucial fact that people are inseparable from the rest of nature and are nurtured by healthy interaction with the earth. According to the author, ecotherapy is exposure to nature and the outdoors, as a form or component of psychotherapy.
This type of therapy is based on the premises of ecopsychology, which explores the relationships between mental, environmental, and spiritual health. Ecotherapy can also involve a variety of methodologies to deepen a person’s relationship with the natural environment and restore mental and emotional balance (Capra, 1982:11). The healing methodologies in this paradigm include indigenous rites of passage and rituals, shamanic counselling, wilderness therapy, such as vision quests or survival training, and simple acts of gardening, nature meditation, or walking outdoors (McCallum, 2005).

McCallum further explains that these methodologies are based on the belief in an interconnected relationship between humans and the environment, and the inability of these systems to live or heal apart from each other. Interrelatedness is therefore important in ecotherapy, as communities of humans are part of this natural whole, with the capacity to adopt as part of a larger system while at the same time are remaining independent with their own identity. Ecotherapy then uses the wholeness found in nature, in working towards wholeness, interconnectedness and integration in communities (McCallum, 2005).

Kelly (1996) supports this view through observing that, in this approach also, disconnection with nature will result in decreased mental health, instability, and delusions, which could lead to self-destruction and environmental degradation. This stresses the importance of the relationship between humans and nature, and identifies therapeutic methodologies utilizing nature.
These include using the outdoors for healing (such as ecotherapy), wilderness therapy, shamanistic healing modalities, and other earth-based therapies that involve immersion into the outdoors and deep exploration of the inherent human/nature connection for the purpose of healing (Kelly, 1996). Connectedness with the wilderness then forms an essential part of ecotherapy and relates to attaining harmony with our natural earthly roots.

According to Clinebell (1996:78), human love and connectedness with the natural world are rooted in their genes. The author uses the word “biophilia” to refer to this genetically based human need to affiliate deeply and closely with the natural environment. Clinebell (1996) gives evidence that biophilia is part of our mental and emotional apparatus. For Clinebell (1996) our love for pets and parks, fondness of house plants and gardening, bird-watching and documentary films about nature are expressions of this genetically programmed longing for connectedness with the rest of the living world.

The author notes further that this interaction can be reflected between people as well, and in South Africa is expressed in “uBuntu”. The Xhosa proverb “uMntu nguMntu ngaBantu” (a person is a person through other persons) captures this interconnectedness within our communities, and with this deeper understanding of participation and collaboration provided overall by ecotherapy, based on the evidence in nature, human relations can be enriched through this process.
The central premise of ecotherapy is thus that our early relation with the natural world has a profound mutual impact on the development of an integrated sense of identity. This identity formation is influenced by a deep pre-verbal level, by our early experiences in nature, and by our culture’s understanding of the natural world (Clinebell, 1996). In this understanding, there is also intimate bonding with the natural world, and according to Clinebell (1996), it is mutually beneficially bound to our well-being and to the well-being of the biospheres. The following section explores different dimensions of ecotherapy as it relates post-conflict healing, its expression in wilderness therapy and its relation to healing at individual, community and group levels.

2.4.1. Ecotherapy and post conflict healing

Intervention through ecotherapy is based on the premise that working with people physically brings about an awareness of trauma locked in the body, and that nature holds a great potential to transform it. This transformation has its basis in Jung’s theory of analytical psychology and resonates with wilderness therapy, which is a component of ecotherapy (Cock, 1998). Essential to the philosophy of the wilderness therapy is the differentiation between doing therapy in the wilderness, and the Jungain approach of using the archetypal landscape to evoke the archetypal history of human nature (Chirot, 1993). Conn (2006), explains that the latter orientation, the physical terrain, provides the challenges and obstacles required to face danger and confront fear, and set limits in an empathetic environment. Challenges occur as a natural obstacle within a journey and demand that the group persevere and rely on each other.
The strength of ecotherapy relies on this philosophical frame that uses nature and the natural environment to heal individuals from social distress. Through carefully planned wilderness trails, ecotherapy philosophy is carried out. This process involves both physical and psychological risk-taking. This represents a core part of the transition required in therapy. The approach assumes that the holding environment and the experience of courage and dignity contrast sharply with the participant’s past experience in urban warfare that created a false sense of strength and courage (Harper and Cooley, 2007). In the work of Jung (1951), the design of the wilderness trail is built on the therapeutic belief that psychic growth has a teleological drive towards wholeness. Thus, ecotherapy combines the views of ecology and of psychology, and assesses the human psyche in the larger context of the earth as a living system.

Psychology in Western culture has tended to identify pain as a pathology or sickness in an individual or family. In ecotherapy, therapists assess symptoms as signals of distress in a larger social context. For Conn (2006) the symptoms in individuals reflect what is going on in the world as a whole, and that a particular individual’s unique way of registering pain has implications for the larger context. From this perspective, in the South African context, ecotherapy would look at the impact of the past and current dispensation in an individual, within the context of his life, family, and community. Bearing in mind the history of South Africa, people have been healing their social wounds without necessarily looking at the effects that this history has had on the social and emotional realm, as well as on interactions with others (The National Peace Accord Trust: 2004).
The vision of ecotherapy is to rehabilitate people within their environment and at the same time to heal communities and to build trust, starting with personal healing. According to Fischer (1982), social-related problems are strongly associated with the social characteristics of communities and neighbourhoods. Thus, those who work in communities would need to treat community contexts as important units of analysis in their own right, which in turn calls for new measurement strategies, as well as theoretical frameworks that do not only treat communities in respect of the individuals that make up that community.

2.4.2. Wilderness therapy as a model of ecotherapy

Gallis and Thomsen (1996) define wilderness therapy as, “an active and experiential approach to group psychotherapy, utilising an activity base (e.g. cooperative group games, rope courses, outdoor pursuits or wilderness expeditions) and employing real and perceived risks (physical and psychological) as clinically significant agents to bring about a desired change.”

In this process, participants make meaning through insights that are expressed verbally, non-verbally, or unconsciously, leading to behavioural change. This is facilitated through both verbal and non-verbal introductions prior to the experience, as well as discussions or debriefings following the experience. Thus, the origins of wilderness therapy can be traced to the stress-challenge experiences associated with taking groups into wilderness environments for recreational purposes, and the activities associated with team-building through the use of challenge course experiences (Gallis & Thomsen, 1996).
Unlike the traditional psychological model, as Gillis and Gass note, adventure experiences with clients turn active therapeutic analysis and interaction into active and multidimensional experiences. This means that the participants become active participants in their own therapy. Furthermore, educational and verbal processes are integrated into adventure-based groups by concrete physical actions and experiences. During an ecotherapy trail, clients’ behaviours are viewed from another perspective; clients’ are asked to experience their behaviour rather than merely talk about it. As a result, the therapeutic interaction becomes observed and holistic, involving physical and affective as well as cognitive interaction, which assists with client behaviour patterns and beliefs (Gillis & Gass, 1996:125).

As such, the unfamiliar adventure experience in the wilderness provides a medium that contrasts with the group members’ previous reality state of trauma. In the process, the clients utilise contrasts in the adventure experiences to see elements of their lives that they tend to overlook, and by reflecting on them, they gain new perspectives of their lives. For Gillis and Gass (1996:48) the participants’ entry into this contrasting experience is often the first step toward reconstruction; restructuring the meaning and direction of their lives.

Abrahams (2006: 125) observes that, when properly implemented, adventure experiences introduce “eustress” or the healthy use of stress, into the group member’s system in a manageable yet challenging manner. This type of stress places individuals into situations where the use of certain positive problem-solving abilities like trust, cooperation, and clear and effective communication is necessary to reach a desired state of equilibrium, and the client is able to work toward this goal.
Thus the process of striving to attain this state of equilibrium is sometimes referred to as adaptive dissonance, where group members must change their behaviour to achieve desired states. The adaptive processes used to create change are healthy and functional patterns for changing group members’ dysfunctional behaviour. Additionally, these patterns and processes often provide the means for clients to achieve therapeutic objectives. Combined with an activity’s contrast, is the appropriate use of physical and emotional eustress. This quality differentiates this therapeutic process from other experiential therapies and serves as a catalyst in the client change process (Gillis & Gass, 1996).

Abrahams (2006) explains that the wilderness adventure trail experiences are usually designed and planned with internal mechanisms that help to resolve conflict and support rehabilitation. These mechanisms are based on holistic experiences that are also organised, and concrete, manageable, consequential, and holistic. Further, they are incremental, as the adventure experiences that are organised to meet the needs of the participants are progressively sequenced. Participants, as a group, begin with easier tasks and gather a sense of competency and mastery for accomplishing these tasks. They then attempt more difficult tasks with an established base of increased skills and confidence.

For Gillis and Gass (1996), adventure experiences are consequential, and the results positive or negative, and generally have an immediate and direct effect on clients. Adventure experiences address different levels of functioning, including cognitive, social, emotional, and psychomotor learning. Combinations of these learning domains provide a holistic perspective on how to help clients to change.
Because of this, as the authors indicate, entering therapy can be extremely threatening, heightening client defence mechanisms and resistance to change. Consequently, most adventure experiences are designed to possess the natural occurrence of solutions in their structure. With unfamiliar adventure experiences, group members are presented with opportunities to focus on their abilities rather than their dysfunctions. This type of orientation diminishes initial defences and leads to healthy change when combined with the successful completion of progressively difficult and rewarding tasks (Gillis & Gass, 1996:77). As a result, rather than being resistant in therapy, group members are challenged to stretch their perceived limitations and discover untapped resources and strengths within themselves. The therapist also frames group members’ efforts to centre on the potential to achieve self-empowerment, and maintain the changes they achieve (Gillis & Gass, 1996).

According to Abrahams (2006), adventure therapy experiences change the role of therapists from passive and stationary to more active and mobile. Therapists are encouraged to actively design and frame adventure experiences around critical issues for group members, focusing on the development of specific treatment outcomes. When utilising adventure experiences with groups, adventure-based therapists take on an objective stance rather than locating themselves as the central vehicle of the change the client is to achieve.
This is central to the change process, as the therapist is able to take on a more mobile role (e.g. supporting, joining, confronting) in the co-construction of change processes with the group. Combined with the informal setting of adventure experiences, the dynamics of this approach allow therapists to remove many of the barriers limiting interaction. In this intervention, thus, while still maintaining clear and appropriate barriers, adventure therapists become more approachable and achieve greater interaction with group members, when compared to traditional group therapists (Gillis & Gass, 1996).

According to White & Hendee (2000) wilderness intervention provides a myriad of general benefits to individuals and society. The benefits of a wilderness experience include improved human conditions, especially in attaining personal/self development and community development. This includes interpersonal and group benefits, and spiritual development, which relate to a profound sense of connection to nature, the universe, or a transcendent Other.

For White and Hendee (2000), wilderness naturalness and solitude are positively related to the development of self. According to the latter authors, the development of a self-construct confirms previous research findings on self-centred wilderness experience benefits, and provides a plausible framework for organising them. Among all the research findings about wilderness experience benefits, the most commonly reported are positive, self-centred effects (White and Hendee 2000). Development of self encompasses personal growth, restored functioning, and the numerous self-measures identified in wilderness user benefit studies, such as self-actualisation, self-concept, self-control, self-efficacy, reduced anxiety and improved self-esteem.
White & Hendee (2000) explain that wilderness naturalness and solitude are further positively related to development of community benefits. Wilderness experiences present a situation in which formality and role barriers are reduced; this nurtures various forms of social cohesion such as trust, co-operation, open communication and group problem-solving ability. Individuals form a community, and this community develops through the wilderness experience by passing through various stages of group development. Consequently, the development of community benefits is similar to social identity benefits, and a very common development of community benefits leads to the strengthening or development of bonds among wilderness group members. The outcome of this process achieves personal growth of participants, enhanced peer relationships with improved communication, and teamwork, making the development of community both a programme goal and personal growth tool.

Ewert and Heywood (1991) tentatively concluded that programmes operating in a wilderness or comparable setting may be effective in creating well-functioning and integrative groups with problem-solving abilities. Arnold and Price (1993) also found that river-runners developed a sense of community, or feelings of communion, linkage, belonging, and devotion to a transcendent group goal. The wilderness experience requires participants to communicate with their peers due to the very nature of outdoor living processes. This peer communication is placed in a context of a caring, compassionate, and cooperative environment, through the establishment of norms and expectations of behaviour. Peer confrontation is an integral part of the communication process. As clients work through problems and issues, they are practising social skills in a safer environment, and allowing them the freedom to express themselves in new ways, which in turn benefits themselves and their community at home (Arnold & Prince, 1993:51).
2.4.3. Wilderness therapy and the development of self concept

Howell (1992) asserts that when a participant is removed from his or her comfort zone or familiar environment, he/she undergoes a state of dissonance. Through the re-appraisal of their dysfunctional attitudes and behaviours equilibrium can once again be maintained. This shift can be reinforced through the natural consequences and stress-inducing properties of the wilderness environment. Howell (1992) explains further that participants are usually characterised by an external ‘focus’ on control and low self-efficacy. They tend to attribute their destinies, successes and failures to people or situations outside of their control, and share the belief that they do not have the capacity or resources to deal with life events. However, since the wilderness environment forces the participants to confront the choices they have made, the only avenue to reduce this state of dissonance is for the participants to take responsibility for their actions and to confront dysfunctional behaviour.

By mastering activities that become incrementally more challenging, the participants not only achieve mastery over their immediate environment, but also develop self-confidence, self-efficacy and an internal ‘focus’ of control. It is postulated that they later transfer this mastery to their home environment, which in the long-term benefits the community. For Howell (1992), where participants are offered progressively more control over their lives, more input into decisions and policies directly affecting them, more room to risk, and more respect for their evolving beliefs and ideas, they become willing and able to accept more responsibility, achieve more academically, and contribute more to their families, their community, and to society.
Essentially then, by removing participants from their comfort area and community environments and placing them in therapeutic residential wilderness settings, their potential for inappropriate behaviour is limited and the factors of family dynamics and home-peer influences are removed. Then, rather than making the emphasis of the programme on rules and restrictions, the focus shifts to challenges and opportunities.

Thus, according to Berman and Berman (2007), wilderness therapy is not about taking troubled individuals into the woods so that they feel better. It involves the careful selection of potential candidates, based on a clinical assessment and the creation of an individual treatment plan for each participant. The involvement in outdoor adventure pursuits should occur under the direction of skilled leaders, with activities aimed at creating changes in targeted behaviour, and providing healing from traumas. The provision of group psychotherapy by qualified professionals, with an evaluation of an individual’s progress, is a critical component of the programme.

Wilderness therapy is thought to create a ripple effect on the life of the individual, the individual’s family, community, and society. The individual participant receives therapy in the wilderness and applies the skills learned there to his family life, his life in the community and in society. The individual now realises that ultimately he or she has a choice about the way their life turns out. The person is no longer “chained” to their environment, their past and their troubling circumstances. They realise that they get to decide whether their life turns out to be good or bad.
In the wilderness, a sense of hope is created for the individual. Other people are no longer considered the enemy. Subsequently, the individual client sees that it is his or her approach to life that determines his or her actions. Whereas in the past clients may have thought that they never had a choice about anything, they come to realise that they have a choice and control over their lives (Berman & Berman, 2007:44).

2.4.4. Wilderness therapy and community development

According to Firtzgerald (2007), human communities consist of groups of people who do things together and individually. People participate collectively through reflection, communication, or action. Bonds that draw and keep people thinking about each other and occupied together may include shared beliefs, shared geography, shared interests, shared experiences, shared traditions, or shared kinship. Wilderness experiences likewise create a feeling of community amongst participants since they have similar interests and are working together to achieve a common goal. As a group or community, they become interdependent and develop reciprocal mutual aid in which they learn to look not only to self-need, but also to the needs of the group (Firtzgerald, 2007).

According to Goldenberg (1999:78), in a wilderness community “a success orientation” exists in which the positive is emphasised. There is an atmosphere of mutual support in which cooperation, encouragement, and interpersonal concerns are consistently present. Goldenberg (1999) explains that ecotherapy philosophy assists in the merging of intellectual, social, physical and emotional learning and development.
Thus, a significant amount of cognitive work emerges that relates directly to questions that were previously or subsequently developed in the process. For Goldenberg (1999:59), the combination of moments of active involvement with moments of personal and group reflection leads to subconscious rational engagement with the participants’ life reality.

2.4.5. Wilderness therapy and group participation

Wilderness experiences provide a structure for creating a safe environment and help participants to explore, understand, and value healthy pro-social behaviour. The experience is a participatory, thoughtful and fun method of building a therapeutic community. Resiliency and positive development fostered in wilderness groups enables meaningful participation in school, family, and youth programmes. Unlike more traditional talk therapies, the practitioner who accompanies the group is not limited to the participants’ self-reports to learn of anti-social behaviour, but directly observes the behaviour (Walsh & Aubry, 1997).

For Walsh and Aubry (1997), direct observation can be particularly valuable when working with resistant individuals who may not want to discuss or give an honest appraisal of their problems. According to Walsh and Aubry (1997:44) direct behavioural observation is one of the most empirically sound assessment technique methods. A major goal is to move the participants from external controls to self-control and empowerment. This entails what Bandura (1986), as cited in Walsh & Aubry, calls “self-reflective capabilities” or the ability to think about, define, and evaluate one’s behaviour.
According to Rogers (1977:44) core conditions for change are genuineness, unconditional positive regard, empathy, and concreteness of the therapist. Genuineness occurs when the therapist is congruent; for example when the therapist is honest about his or her feelings and able to communicate with the client, and, if appropriate, what he or she is experiencing at that moment (Russell and Hendee, 2005:144). In this intervention, participants also directly observe the treatment team or the therapist as living, eating and communicating in the same environment as they are, facilitating a connection that enhances genuineness.

The wilderness experience further allows the treatment team to step back from their traditional roles as authority figures, allowing nature and natural consequences to provide reinforcement and punishment of appropriate or inappropriate behaviour. The environment is the focus for reinforcement and punishment, and informs the clients of their challenges. The outcomes of the challenges of the environment are real, immediate, and consistent, and guide the participants to their goals by highlighting the challenges they struggle to attain. With the group, living in nature with the treatment team, and natural consequences, creates an entirely different perception of the client-therapist relationship, facilitating genuineness for the treatment team in their relationship with their clients (Russell & Hendee, 2000:63).

According to Russell and Hendee (2000), in the work of Rogers (1977) the state of unconditional positive regard of the treatment team refers to a warm, positive, and accepting attitude of the therapist towards the client. Whatever the client is experiencing, whether it is fear, pain, isolation, anger or hatred, the therapist should be willing to accept these feelings and care for the client, i.e. be non–judgmental.
This non-judgmental attitude requires the therapist to maintain positive feelings about the client without evaluating the client. The treatment team approaches the therapeutic relationship with compassion and patience, allowing the clients to work through their resistance and anger. They do not force change, instead allowing the environment to force responses through natural consequences, and utilising the informal setting to be approachable for clients (Russell & Hendee, 2000).

In this environment then, the usual interaction of therapist and client do not apply. Rather, the therapist provides guidance and gives suggestions and clear feedback, and in addition lives through the same experience as the client. Russell and Hendee (2000) clarify that, because of the unique relationship that is built with the treatment team, they are seen as role models and not as the enemy, further enhancing the relationship and allowing room for discussion and discourse without the stigma of traditional therapeutic roles and environments. Empathic understanding by the treatment team, as the authors note further, occurs when the helping team accurately senses the feelings and personal meanings that the client is experiencing in each moment, and can successfully communicate that understanding to the client. The therapist grasps the moment-to-moment experiences which occur in the inner world of the client as the client sees it and feels them, but without losing the separateness of his or her own identity in the process. When conditions of empathy are met, change is most likely to occur. Therapeutic moments can occur at any given time while in the wilderness. As the client experiences those moments, the treatment team must be available to be with the client, and work through the pertinent issues in an empathic and caring manner (Russell & Hendee, 2000).
Concreteness of the treatment team, which is another important component of the process, is especially critical for marginalised groups, due to their physical, life-stage, neurological, and psychosocial development (Miles, 2003:92). The therapeutic experience with the subjects must be concrete enough so that the subjects, who have not fully developed cognitive abilities to think in the abstract, can relate therapy to their daily lives. The therapist must therefore be specific, and the outcomes and lessons of the process must be real and clear. Thus therapists who are nondirective or highly conceptual might receive an inappropriate response, as the client may not understand the message that the therapist is trying to convey (Miles, 2003).

Often, in this form of therapy, clients operate in the concrete operations stage of cognitive development and communicate in either/or terms. The treatment team therefore has to directly relate tasks associated with wilderness living to the subject’s life making lessons learned from the activity relevant and meaningful. As Russell and Hendee (2000:87) state when commenting on the ultimate outcomes of wilderness therapy “wilderness therapy leads to a better functioning individual, family, and community system. Eventually families that have been torn apart by the client’s problem behaviour relating to trauma and stress are brought back together, and the family structure is reintegrated as well.”
2.5. Ecotherapy and healing of ex-combatants in South African society

For several years now, the National Peace Accord Trust (NPAT), a South African Non-Governmental Organisation (NGO) that works extensively in the field of peace and peaceful social transformation, through its Trauma and Transition Programme (TTP) and ecotherapy trails, has attempted to address the psychosocial needs of ex-combatants. Despite developing various types of psychosocial interventions (some in partnership with other service providers), the needs of many ex-combatants remain unmet (The National Peace Accord Trust, 2004).

Gear (2002) indicates that little information has been gathered on these interventions, or an evaluation of the impact of these on the lives of the ex-combatants. In addition, little, or no dialogue has taken place with the Government on the role the state can play or should continue to play in the psychosocial reintegration of ex-combatants. Although some ex-combatants have benefited from healing and re-integration interventions, overall the impact of these interventions remains limited and seems to fall short.

Evidently, many ex-combatants in South Africa experience a wide range of stresses in their transition from military to civilian life (Gear, 2002). For ex-combatants, the line between manifestations of traumatic war experience and stressful transitional experiences is often blurred, and the two may become intertwined. In the context of poverty and marginalisation, psychological well-being is not often regarded as a priority, and violence-related trauma is not necessarily recognised as distinct from other stresses (Bowling, 2000).
Gear (2002) explains that, in addition, psychological services are out of reach for most South Africans. This is not only the case for ex-combatants, but for the general public as well. Thus Gear (2002) claims that there is little awareness of the potential benefits of these services, which leads to a general reluctance to utilise them. Although there are a small number of non-governmental initiatives in different parts of the country that are attempting to cater for the psychological needs of ex-combatants, these are few, overburdened in terms of work, and under-resourced.

From this extract, and based on the work of the National Peace Accord Trust, in the South African context, ecotherapy would look at what impact the past has had on an individual within the context of his or her community. The vision of ecotherapy therefore would be to rehabilitate people within their environment and at the same time heal communities and build stability starting with personal healing. Furthermore, according to Jordaan and Jordaan (1998:107) ecotherapy experiences have confirmed that individuals and communities require further dialogue to assist them with justice, healing, and reconciliation especially since the country did not address these issues sufficiently.

Egan (1990:14) confirms that ecotherapy is designed to teach people how to communicate openly, to resolve conflict constructively, and to solve problems effectively, all of which are seen as essential life skills which do not come naturally but which need to be learnt. For Egan (1990) the theory of ecotherapy shows that the rationale for peace education and community healing stems from social learning theory. In this view violence is a learned response that, with appropriate intervention, can be unlearnt.
Thus, ecotherapy is essential in townships that are threatened by crime and violence, as ecotherapy involves endeavours in which the central intention is communal healing. Based on the above premise, ecotherapy, as practised by the National Peace Accord Trust, aims to test the feasibility of facilitating restorative justice dialogues, mediating between ex-combatants, assisting youth at risk and helping survivors of human rights abuses. South Africa is more focused on social, economic, and cultural development, thus ecotherapy can be a helpful mechanism for spiritual and psychological healing in these communities.

2.6. Summary

Ecotherapy originates from the emerging field of ecopsychology that explores the relationship between one’s emotional health and the natural world (Cock, 1998). They are outdoor-based programmes also referred to as wilderness programmes. In this approach, it is believed that motivations and behaviour can be altered through specifically designed programmes that take place in an outdoor setting. The aim of ecotherapy is thus to move participants toward pro-social values, such as respect for others and the acceptance of personal responsibility (Kimball & Bacon 1993).
In general, ecotherapy does not endeavour to replace other intervention practices. Rather, ecotherapy is an approach that is frequently utilised to enrich the objectives of other therapeutic initiatives. Ecotherapy generally consists of various techniques, such as time spent alone referred to as “solo”, journaling, vision questing, and an array of teamwork activities such as abseiling, canoeing and hiking (Howell, 1992:38). These exercises, metaphors, and symbolisms are characteristic of adventure interventions and have been utilised to help ex-combatants to heal from past trauma, and to reintegrate into society. The next chapters will outline the application of this approach within the context of a research process with ex-combatants from the Mdantsane Township.
3.1. Introduction

This study is an exploratory study that sought to explore and examine issues of a topic on which limited research has been undertaken. Rubin and Babbie (1993:98) note that in an exploratory study a researcher utilises exploratory research design mainly when examining a discourse that is relatively new and insufficiently studied. The aim of the study therefore was to gain an understanding of the participants’ contextual experiences and to assess and evaluate the effectiveness of ecotherapy in facilitating their post conflict healing. As an exploratory study, the research required a design that is investigative in order to arrive at relevant conclusions (Rubin & Babbie, 1993:98). According to Flick (2002:72), the most important goal of an exploratory study is to produce knowledge and an understanding of specific discourses, in accordance with a proposed research matter.

The form and analysis of the research also follows a qualitative design. In accordance with the view of Babbie and Mouton (2001), qualitative research is important and appropriate for this study, as it attempts to explore the subject matter with the researcher as a circumspect participant in the project. Furthermore, qualitative research occurs in the natural setting of the social actors or research respondents themselves.
Blanch and Durheim (1999) argue that, as compared to quantitative research, qualitative methods allow the researcher to study selected issues in-depth, and attempt to understand the categories of information that emerge from the data. Babbie and Mouton (2001), note that the primary goal of studies using this approach is defined as ‘describing and understanding a research hypothesis, rather than explaining human behaviour itself.’

For the purpose of the study the researcher utilised ecotherapy as a tool guided by a social survey design, while at the same time its therapeutic properties were adhered to (to transform and channel the respondents feelings of despair and powerlessness into catalytic materials that drive the respondents’ motivation for healing and empowerment). Thus, the researcher utilised the properties of ecotherapy as a research instrument, at the same time making use of its properties to facilitate healing amongst the research respondents.

Kimball and Bacon (1993) note that, as part of the research process, ecotherapy can be utilised to move participants toward pro-social values. Based on the implementation of this research the study was divided into three phases: pre-interviews, an ecotherapy trail, and post interviews, as discussed further.
A. Pre-interviews:

Phase one consisted of screening and pre-interviews with eight ex-combatants. This phase consisted of the data collection, which involved extensive interviews with the ex-combatants about their feelings of dislocation and despair, as a result of their past and present experiences of conflict and violence. Furthermore, the screening process involved examining the respondents’ personal traits and characteristics, in accordance with the project goals and objectives to assess the suitability of participants to undergo the ecotherapy programme.

During the screening phase, the researcher requested organisations like uMkhonto weSizwe (MK); Azanian Peoples’ Liberation Army (APLA); Self Defence Units (SDUs); Self Protection Units (SPUs), and The South African National Civic Organisation (SANCO), who had referred individuals for the ecotherapy programme, to comment on the potential participants’ well-being and their levels of personal and social functioning. These organisations were asked to identify and comment on respondents who demonstrated elements of social dysfunction, displayed dysfunctional behavioural patterns, showed signs of struggle to adopt to their civilian life, or demonstrated signs of post traumatic stress disorder. This information was used to conduct risk assessment amongst participants and to compile a profile of each potential participant in order to guide their participation in the ecotherapy intervention. (See Appendix 1 for a profile of each participant)
B. The ecotherapy workshop:

Phase two involved the actual intervention through ecotherapy. Between the pre- and post-interview sessions, the ex-combatants were taken through a therapeutic healing workshop of ecotherapy to help them to deal with their past trauma as a result of their exposure to violence through their involvement in the liberation movement. This workshop was implemented and co-facilitated with the psychologist from the National Peace Accord Trust, Mr. Gavin Robertson, and a trail guide from Hobbiton, Hogsback Education Centre.

The ecotherapy trail consisted of a number of preparation sessions, a four-day transformation trail in Hobbiton, Hogsback Educational Centre in the Eastern Cape, and a post-trail support programme in Mdastane Township, together with a range of different follow-up activities for those who were interested. The cost of the trail was approximately R24 000, and most of this was covered by the National Peace Accord Trust. The organisation also provided the necessary hiking gear including sleeping beds, accommodation tents, bottled water and other essentials.

The researcher in his role as a social worker and programme manager facilitated the ecotherapy programme with the assistance of the psychologist Mr. Gavin Robertson from the National Peace Trust who acted as a co-facilitator. Both were experienced in the ecotherapy trail, including a trail guide from the Hobbiton, Hogsback Educational Centre. The researcher/programme manager, assisted further with the capturing of data, managing the physical safety of the respondents, and containing the risk-taking of the participants.
Quite frequently, the researcher and co-facilitators roles went further in that they had to contribute actively to the empathetic therapy of the ecotherapy trail and manage the emotional climate. The process was however facilitated in Xhosa, since the language ability of the programme manager allowed participants to speak freely.

Thus central to the healing process was a four day ecotherapy trail in the Hobbiton, Hogsback Educational Centre in Eastern Cape. On arrival on the day of the programme, at about 12h00, both the participants and facilitators gathered at a dining hall where we were welcomed by the centre manager, who also explained the rules; eating schedules; safety drills, or rules and general norms of the centre. Afterwards we were shown our rooms, where we unpacked, and at 13h30 we were called for lunch. At 14h00 we prepared to leave for hiking, but before leaving an introductory session was held at the foot of the mountain, when participants were invited to carve and paint their individual walking sticks. In a first exchange the participants talked about the personal significance of the painted colours and motifs they had chosen for their sticks. Some participants carved their traditional fighting sticks, which were cross-hatched at the top. Others used different colours to express their fears, expectations and hopes regarding their forthcoming personal journey.
The programme manager explained that the stick stood for their personal story and the individual inner journey they would be taking up. At this point, the co-facilitator, Mr. Robertson, explained to the participants the principal rules of hiking. These were mainly intended to raise awareness of the natural environment that requires discipline and respectful behaviour like walking in a line and not littering the area. The first day session concluded with an evaluation, prayer and cleansing ritual. In the receiving of a wave of fire smoke the participants and facilitators cleansed themselves for the journey and thanked the mountain for taking care of them. During the first day, the participants spent their time at the starting point. The atmosphere was generally defensive and participants were reserved. They were very careful with their comments and contributions and adopted an approach of ‘wait and see’.

Day two focused on preparing respondents for hiking and solo experiences in the night. The physical route of the hike was designed with the understanding that the physical obstacles, challenges, achievements and their parallel psychological equivalents were part of the same process. Often the challenges of hiking appeared to respondents to be insurmountable or dangerous. However, the manner in which these challenges were selected and presented was such that they were perceived as high in risk, whereas they were low in actual risk. They gave the feeling of personal empowerment and a sense that others could be trusted. Accordingly, this ecotherapy trail also involved individual overnight stays “solo”. This solo activity was utilised as a healing ritual.
The “solo” addressed respondents’ issues of social harmony and wellbeing, and the healing of individuals by means of tracing their individual personal history. Through this activity respondents later recorded that they had learnt more about dealing with painful memories. In this manner, the participants came to learn that the group wellbeing, and a sense of togetherness, depended on the individual respondent’s wellbeing.

On day three discussions and activities allowed participants to rely on one another and be supportive of each other. On the other hand, the change of environment, group activities, and intense discussions facilitated the transformation process. In particular, the sub-group exercises and activities allowed gradual reframing of conflictual relationships among the participants. The sharing of space, food, water, and other necessities fostered effective communication between the participants. For most participants it was their first time being in the wilderness. These conditions increase the possibility of trauma flashback especially at night. Here the participants, with the help of the facilitators, paid more attention in order to assume a supporting role in protecting one another and confronting one another and their fears. A questionnaire was used to steer discussions about the past, present, and future aspirations. All these exercises were tailored towards self-empowerment, building respondents self-esteem and showing respondents that self-healing and development starts within themselves. The exercises were also designed to influence the manner in which participants viewed the outside world.
Day four was composed of frequent exchanges, both formal and informal, around the fireplace. Official sessions, reflecting on the feelings and challenges met by the participants were held. An important principle during the whole ecotherapy trail was that every respondent was encouraged to face his or her past history; emotions, and experiences. The facilitators were always ready to listen to those who wanted to talk about their concerns and their past. However, whenever possible respondents were encouraged to talk about their feelings during the group evaluation sessions. In this manner, the group developed a sense of mutual trust.

During the last session, the participants shared their most important experiences of the inner journey, and their significance. The way forward in terms of facing challenges in their future was encouraged and ongoing support was offered to them. A prayer, a song and a last cleansing ritual around a candle set was the official end to the ecotherapy trail. After returning from the trail, respondents became involved in an ongoing support programme. The follow-up group sessions assisted with positive reinforcement and referrals to ongoing services for those who needed them.

C. Post-interviews:

The third phase involved individual participants in post-interview sessions and a joint interview session in a focus group setting with all the respondents. These post interview sessions were carried out with the participants to assess their changes of perspective with regard to their personal feelings of despair and dislocation and their feelings about their communities after going through the ecotherapy healing workshop. Furthermore, the central premise was to reinforce positive behaviour and to provide support and referral to those who needed it.
Whenever possible, data was checked against the pre-interviews to earmark changes in the respondents’ perceptions of their social realities and their experiences of the healing process. This checking process was also used to verify and note behavioural modifications amongst participants as an outcome of their participation in the ecotherapy. The focus group was afterwards implemented to consolidate the initial information that had been obtained, and to integrate further areas that may have been previously overlooked.

3.2. Limitations of the research project

A methodological limitation in this research relates to its reliability relative to the application of the outcomes of the study to the population of ex-combatants: Because the sample group is relatively small, and the sample was drawn from one location (Mdantsane Township) it would be difficult to generalise the study findings beyond this scope.

According to Kimball and Bacon (1993), such limitation may often occur in research because of its nature and scope. Furthermore, the author indicates that the demographics, sampling, and the resources the researcher has at his or her disposal, as well as the result of limited financial resources may limit the research objectives (Kimball and Bacon, 1993:74). These factors were relevant to this research and affected its application and generalization. However, this study was a pilot study, and was generally the first study of this nature in the Mdantsane Township.
Another limitation was the representation in the sample group. The sample consisted of male respondents only. This related to the difficulty in locating female respondents to participate. As such, the study does not reflect the experience of women in violence and conflict, relative to the liberation struggle and their healing from its traumas.

There are some general limitations that need to be brought to light with regard to this study, especially relative to the ex-combatants themselves. Some of the participants expressed scepticism about the study and questioned the motive of the researcher in undertaking this work. Other participants, because they had been disappointed in the past and had had bad experiences with other institutions or authorities, were not convinced of the purpose and the objectives of the project. Generally, there were fears amongst the participants about dealing with painful memories, and fear of opening old wounds, and having and to relive their trauma.

3.3. Research design and methodology

The researcher utilised a qualitative method of data collection and data analysis, because this study aimed to gain an in-depth understanding of the research discourse. Techniques of screening respondents, pre-interview techniques, post-interviews and focus group techniques were utilised to carry out the project process and objectives. This ensured authenticity of the research findings and validation of the research themes (Bailey, 1987:51).
This approach allowed for a cross-validation of the research experience. For the researcher it was essential to examine the participants’ perspectives, both prior and post-intervention, to assess the effectiveness of the intervention using ecotherapy as a methodology to be tested.

As the study attempted to examine the effectiveness and relevance of ecotherapy for post conflict healing, it was crucial to use post individual interviews and focus group interviews to provide a clear understanding, and to cross-validate the themes revealed by the study and the impact made by the methodology on the lives of the respondents. According to Flick (2002:53), in qualitative research the question of how to gain access to the field is crucial. In qualitative research, as the writer explains, the contents that a researcher looks for are either closer or more intense. This means that, a qualitative research process sometimes may be personal to the respondents, which was the case in this study. This is unlike the quantitative research method where facts and statistics are viewed as essential elements.

Flick (2002) states that in qualitative open interviews, the interviewees and the researcher become closely involved. This is necessary to gain an in-depth insight into the topic being examined which is essential rather than simply handing out a questionnaire. In this study, the respondents were given an opportunity to talk about their deeper feelings and, in the process, it hoped to bring healing and closure to their negative feelings as a result of trauma related to their role in combat.
Relating to interviews, Bowling (2000) notes that in a qualitative research method the recording of interviews is linked to a degree of disclosure by the research subjects about their lives. Their response is usually spontaneous and cannot be controlled in advance. For Bailey (1987), from a methodological point of view, the researcher will do more justice to the respondents if he or she comes prepared and well informed about the procedures to be followed. This research aimed to achieve this objective through various stages. The research process started by defining the goals and objectives of the project. Clarifying the goals and objectives helped to keep the research focused. Exploratory research, as in the case of this study, goes hand-in-hand with goal clarification (Flick, 2002). The screening and pre-interviews, the actual ecotherapy, the post-interviews and focus group reinforced the research process.

3.4. Sampling

According to Webster (1985:108), a sample is “a finite part of a statistical population whose properties are studied to gain information about the whole. When dealing with people, it can be defined as a set of respondents (people) selected from a larger population for the purpose of a survey.” A population is a group of individual persons, objects, or items from which samples are taken for measurement; for example, a population of presidents or professors, books or students. The sample was composed of eight candidates who were all ex-combatants of the liberation struggle from Mdantsane Township. A screening process was first undertaken, which focused on those individuals who, amongst the required sample group, displayed symptoms of trauma and negative behavioural patterns.
All the respondents voluntarily participated in the process and were requested to sign an indemnity form on safety, risks, confidential matters, and contractual matters relevant to the ecotherapy. The researcher’s task was also to select the sample group, based on an accurate screening procedure and referrals from relevant organisations. The process was crucial, in that it ensured that the research arrived at a desirable outcome and decisive conclusion. For example, a researcher may decide to draw the entire sample from one representative unit or zone, even though the population includes respondents from other zones.

When using convenient sampling procedure, the researcher must be confident that the chosen sample is truly representative of the general population to be studied. For convenient sampling procedure compliment a qualitative research method in that it facilitate an initial contact between the researcher and study subject from the beginning of the project. According to Glasser and Hert (1999), a stratum is a subset of the population that shares at least one, or more common characteristics. Examples of strata might be males or females, managers or non-managers, or victims of abuse or a marginalised group, or, as in this case, former combatants who were exposed to a violent and a traumatic past.

The chance to be selected as a respondent depended primarily on the availability of the respondents throughout the process of the research and whether or not the participants displayed levels of distress in accordance with the project needs and objectives. The researcher utilised a convenience sampling procedure. Convenience sampling is a non-probability sampling technique where subjects are selected because of their convenient accessibility and proximity to the researcher (Webster, 2004:91).  

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According to Webster (2004) subjects in a convenience sampling are selected just because they are easiest to recruit for the study and the researcher did not consider selecting subjects that were representative of the entire population.

Bailey (1987:59) contends that a target population refers to the specific set of cases or subjects that a research seeks to study. The choice of this sampling method relied on the fact that Mdantsane has a very large population of ex-combatants with these traits and it would have been difficult or impossible to select every member of the population with these traits. In this convenience sampling members came from different zones of the township (From Zone 1 to Zone 18). In all forms of research, it would be ideal to test the entire population, but in most cases the population is just too large so that it would be impossible to include every individual. The researcher preferred this sampling technique because it is fast, inexpensive, easy and the subjects were readily available. However, the most obvious criticism about convenience sampling is sampling bias, i.e. that the sample is not representative of the entire population. In contrast, Lyndale (1997) stresses that any process of identifying a correct sample group for a social survey is an extension of convenience sampling.

3.5. Data collection

This study consisted of both in-depth interviews and group discussions, using detailed questionnaires with open-ended questions. These individual interviews and group interviews were in employment to collecting data. All the respondents were interviewed prior to exposure to the ecotherapy process, and again, after they had gone through the healing process.
According to Bailey (1987), in-depth interviews involve a series of face-to-face, detailed discussions with selected people who represent the wider population. One of the advantages of in-depth interviews is that research subjects can express their opinions in a freer, more comfortable and informal manner, and can also touch upon areas that they consider painful or uncomfortable, in a more relaxed and acceptable environment. On the other hand, information from in-depth interviews is difficult to transcribe and interpret (Hofstee, 2006). However, using a general interview guide, consisting of relevant open-ended questions, the researcher was able to interview the subjects.

The first phase of the research project (screening and preparation) started in November 2006. This stage started by meeting with the leadership of political veterans from political organizations and community structures. These structures and organizations included: The South African National Civic Organisation (SANCO), Azania People’s Liberation Army (APLA), uMkhonto weSizwe (MK), Self Protecting Units (SPU) and Self Defence Units (SDU). Together with the leadership of these groups, the purpose and objectives of the study were discussed. Furthermore, the leadership, together with the project managers, discussed possible subjects and individuals who were more likely to benefit from the programme and who were most suitable for this project objective in accordance with the traits described earlier. The leadership facilitated the meetings between the ex-combatants population and the researcher. At this stage, the project managers screened each individual candidate using a self-report questionnaire. Additionally, as part of the preparation stages the project manager analysed existing literature about the wilderness therapy preparation phase.
The second phase entailed the actual ecotherapy process, and consisted of a trail in the Hobbiton, Hogsback mountains in the Eastern Cape. This took place from 2-6 May 2007. During the trail Mr. Gavin Robertson co-facilitated the proceedings of the trail, while the researcher facilitated and at the same time recorded all that was said or occurred throughout the trail. Collection of data, which involved making video, taping, taking notes, observing the subjects, and recording both verbal and non-verbal cues during the sessions.

A questionnaire schedule for the participants was prepared for the group exercise, based on four categories:

A. The respondents’ thoughts and feelings about their relationships with their families; communities and the world around them.

B. The impact and experience of the trail.

C. Understanding key concepts of forgiveness, reconciliation, forgetting, forgiving oneself and others, talking about the past and future, and the respondents’ subjective views about change and rehabilitation.

D. Contact experience with other respondents and talking about the past, present, and future, with a view to personal change and development.
The third phase (collecting data from each participant after reintegration) happened between 8-12 June 2007; a few days after the respondents came back from the trail. The intention was to record the respondents’ experiences of the healing process. In this regard, the project manager handed the participants another questionnaire that examined the effects of the trail at physical, intellectual, emotional, spiritual, and psychological levels. Furthermore, a follow-up interview in a focus group was conducted between the 20-24 June 2008. The intention was to consolidate information and to promote and reinforce healing and sustained constructive behaviour.

3.6. Data analysis

The intense interview schedule of this research led to large volumes of data, and as a result, data analysis was time consuming. The researcher was compelled to reduce some of the data to focused themes. This process, according to Bailey (1987) is called data reduction. The data analysis was focused on the responses and experiences of the respondents before, and after, they had gone through the ecotherapy healing process. This process of data reduction was adapted throughout the study. The establishment of a focus group also ensured that the researcher was able to integrate the data, and was able to undertake an in-depth data review, which enhanced the study’s conclusions. Overall, the respondents were interviewed, and responses assessed alongside related literature and publications on the topic. According to Singleton (1988), there are numerous ways to analyze data. This involves content analysis, cohort analysis, and reviews of similar publications.
The researcher utilised familiarization and immersion tools of data analysis. According to Kavaratzis (2004:15) the process of data analysis begins with the interview process, where the researcher has already begun to familiarize him/herself with the information gathered. Part of this familiarization process entailed working with notes immediately after the interview, by transcribing them and capturing them before anything was forgotten. The process of immersion began after all the interviews were completed, and a review of the field notes and interview transcripts began. This process was achieved by reading in detail all the field notes and transcripts and becoming familiar with them. More notes were made and the process continued until patterns in the data could be identified.

Thus for the purpose of this study familiarization and immersion systems were chosen for this study so as to correctly analyze important contents and themes. Content analysis helps with bringing order out of the chaos (Baker, 1988). The content analysis employed was also based on data received in accordance with predetermined themes. The researcher collected and analysed data according to each relevant theme and sorted it into pre-determined themes.

A report of each interview stage was compiled. Each report included information on the respondent’s social circumstances, his personal circumstances, experiences of trauma, his perceptions of family, work and the community, psychological disparities, and recommendations that were suggested to him for healing and self-help. The major themes and findings of the research are presented in the next chapter. This data analysis includes direct quotes and expressions by the respondents that reflect, overall, their responses to the ecotherapy process.
3.7. Ethical considerations

This project aimed to adhere to the highest ethical principles. Klaidman and Beauchamp (1987) indicate that ethical principles in research consist of respecting privacy, moral obligations, the principle of credit, and the respect of personal autonomy. As such, the researcher ensured that objectivity and accuracy principles throughout the entire research project were observed. This meant that the researcher did not interfere with the research themes, research findings, nor manipulate data so as to accommodate the researcher’s preconceived ideas about the outcomes of the study. This ensured that the researcher did not commit scientific fraud, for example, by fabricating or misrepresenting data. Thus, all cited or used information or ideas were referenced to avoid academic fraud.

In addition, all the respondents participated voluntarily in the study. The researcher ensured that the respondents understood the purpose of the project by explaining it from the start. The researcher obtained informed consent, in the form of the completion of an indemnity form by the participants. This ensured that the researcher also respected the privacy of the participants, as confidentiality was guaranteed. The researcher also committed himself to ensuring that all issues that were relevant to other people or to the community would be reported to them through feedback of the process. According to Resnik (1994), a researcher should anticipate the consequences of his or her research and be responsible for them, as well as attempting to prevent harm to the subjects or the public and should promote social welfare through his research. In this respect, the research process was implemented to adhere to these principles.
3.8. Summary

This project utilised an exploratory and descriptive research design. The research method used was a qualitative research method. Eight ex-combatants participated in this study, which sought to assess ecotherapy as an effective intervention strategy as well as its practical application with ex-combatants to achieve healing and restoration in their levels of functioning. The process of data collection was composed of three phases: Data was gathered during pre- and post-interviews and focus group discussions were held before and after a healing eco-therapy process in which the respondents participated. The research information was compiled, and the next chapter outlines the overall findings of the research project.
CHAPTER FOUR: FINDINGS AND ANALYSIS

4.1. Introduction

This chapter consists of three components; the first component deals with the pre-interviews/screening section of the research findings prior to the ecotherapy intervention. It presents information on the psychosocial state of the ex-combatants as a result of their past violent experiences and traumas prior to their healing experience. The second component deals with the healing process and the recorded impact of the ecotherapy trail. This chapter also outlines the process of ecotherapy and the recorded experiences of the respondents during the ecotherapy trail. The third component is an assessment of the participants’ emotions after their healing experiences, as narrated by themselves, and based on both the individual interviews and their comments in focus group interview. In total, these three components deal with ex-combatants’ experiences during and after their healing process. In the end, the researcher also examined other effects of the healing process on the respondents, at a personal level.
4.2. Findings of the pre-interviews

The next section will present the responses of respondents during the pre-interview. During the pre-interview, the respondents were asked questions under the following categories: Social issues including family, community participation, and work. The questionnaires also focussed on societal matters that had contributed to the respondents’ social distress. Most of the ex-combatants described a dislocation from social institutions, which emerged as a prominent theme. In accordance with the interview schedule, respondents were “labelled” as persons by numbers as P01-P08. This technique was used to be able to identify respondents’ individual responses, and to trace independent perspectives.

4.2.1. The social issues, including family:

It was clear, during the discussions, that ex-combatants felt that their family members rejected them because some members believed that it had not been necessary for them to join the armed struggle. The respondents said that, because of their absence for many years from their homes, there was a sense of resentment from their families. When exploring this, the respondents explained that their families resented them because they felt they had not been there for them during times of hardship, and that they had missed their family’s or children’s milestones whilst they were in exile.
Ex-combatants were asked how they felt about leaving their families and going into exile. One of the primary responses that emerged was that the ex-combatants believed they had done what they did for the greater good of the country. They felt that those individuals who now resented them for what they had done were unappreciative and selfish. This was because the ex-combatants, in fact, felt that they had joined the liberation struggle so that their children and families would not have to continue to live under apartheid.

**P01** said, “I did not believe it, when my parents shouted at me because I am unemployed accusing me of running away from school to join a useless cause. When I asked for something I need from my younger brothers and sisters they say I must go and ask it from Mbeki and his allies because I fought for them, now they have forgotten all of you although you sacrificed everything for them.”

It was evident during the pre-interview that most of the ex-combatants felt neglected and were resentful towards the current government because it had not fulfilled the promises made during the struggle.

**P02** said, “If I knew that I will one day end-up poor with no means; education or formal skills because of joining the struggle to fight for my country, I wouldn’t have joined the struggle.”
Another participant (P03) stated “I was recruited when I was just 16 years doing standard five, when I return back I was 29. I had no formal education all my friends and siblings who were left behind are educated some are teachers; nurses; and lawyers and I have nothing to show for all those years I spent in exile, I am nobody all because of what so called struggle.”

Some other participants described their family experience in similar fashion.

P02 said, “It is difficult at home, because my parents died while I was away, my younger brothers and sisters had to live with relatives who treated them very bad. Because I am the eldest my siblings resent me because they felt I abandoned them, and that I should have been there for them. For example, at home they treat me like a stranger I do not have a say in anything regarding my family affairs.”

Another participant (P07) said, “I feel like a burden to my family because I left them and now I am back. I never had a contribution towards my family prosperity and sometimes I am even afraid of eating in front of my family members because subconsciously it is as if they are judging me or I am judging myself because I have done nothing for my family.”

It was clear in the respondents’ responses that all the ex-combatants were subjected to some form of rejection by their families as a result of their decision to join the struggle. First, all the respondents’ families had suffered some form of harassment from the apartheid regime because of the respondents’ decision to join the armed struggle.
Their family members and relatives were terrorised and abused because they were perceived to have information that might be helpful to the apartheid government’s national security. According to the ex-combatants’ perceptions, their families were not supportive of their decisions to join the liberation movement. They said that some of them came back old and some injured, and therefore needed care. The respondents believed the government did not provide assistance for those families who had to look after the sick and injured ex-combatants. The respondents believed that their family unit was greatly, and negatively, impacted by their decision to join the struggle.

4.2.2. Community Participation:

When examining the respondents’ perception of distressing aspects of their community, what was evident was the manner in which they believed the community was unappreciative of and disrespectful towards ex-combatants. The respondents felt that the South African public generally undermined their sacrifices and their contribution to the struggle. Some described their situation as that of sacrificial lambs, and that their communities did not recognise them as heroes.

The respondents felt ill-treated by their communities and by police officers because whenever there was a reported violent crime the community and police were very suspicious of them. The respondents claimed that the community alienated them from community projects because they felt the community believed the government should designate a programme to deal exclusively with the interests of ex-combatants.
**P05 stated** “Our community only acknowledges people like Mandela; Mbeki; Chris Hani as heroes. We feel like forgotten heroes. Most of our community members believe that our existence had no purpose, in particular because in the country there was never so to speak really war.”

**P04 likewise noted** “I feel very marginalised in my community life because ex-combatants are thought to be dangerous and that we do not have the necessary administrative competences that community politics requires. I do not feel our contribution is recognised by our communities. Things are made worse by the fact that we also add burden towards the community limited resources because of our unemployment status and poverty.”

The respondents believed that because of their combat skills the community members viewed them in a negative manner. Most of the ex-combatants believed that as a solution, the government should employ them as community safety marshals because they felt they were already fulfilling that duty in their communities anyway.

Most of the respondents believed the relations between them and their communities were exploitative. They said that community members asked them to work in their gardens or do odd jobs and would pay them less than they would normally pay or perhaps even pay them with food. From the interviews, it was clear that most of the ex-combatants preferred to socialise with their ex-combatant friends because they felt that they did not fit in with their community and believed that other ex-combatants understood them better.
**P01 said** “In my community they treat me like an animal and a person with no conscience. They are treating us like cheap labour in our communities. When there is a violent protest in my neighbourhood, this gives me flashbacks of violent scenes from my past. We killed people using necklace [burning car tyres] to kill people. Although the community understood the reasons back then, but people from those victims’ families (relatives and family members of people we killed) are still here and they know what we did to their loved ones in the name of freedom. When we have a quarrel with a particular community member who is aware of our deeds in the past, they called you names (killers) although they are fully aware of the atmosphere then and why we did those things.”

A number of participants felt disconnected and alienated from the rest of their community. When they talked they mentioned ‘the dream of Azania’, a place they were promised when they joined the struggle. Azania was described as a land promised to them in addition to wealth, schools, hospitals, and recreational facilities which would be available and where all ex-combatants were to settle with their families when the struggle was over. Most of the respondents still believe in that promise and perceive Azania as the correct approach that the government should take in addressing their situation.
4.2.3. Work:

All the respondents were unemployed, and had no relevant skills to be employable in the formal sector. Furthermore, the respondents believed that if they were offered employment they would probably be employed in dangerous and hard jobs like being security guards. The ex-combatants believed that they were employed in jobs that no one wanted such as manual labour with low payment. The respondents also believed that the employers do not assess their skills properly because, according to the respondents, politics are also some form of education, which employers failed to recognise.

Most of the respondents felt that through politics they had learnt to organise, had acquired administrative competency, negotiating skills, speak in public, form and manage community structures, and mobilise people. They expressed the view that government and employers should consider these skills and that their experience in the army should be properly assessed and given proper accreditation. Most of the respondents said that their training, military order and experience in combat had distinguished them from normal civilian life, and that it should count for something when it comes to government recruitment in police, security and intelligence structures.

**P06 said** “When we came back from exile we were integrated into the new South African National Defence Force without proper preparation or debriefing. We found ourselves taking orders from those we were told and taught to be our enemies. We could not survive because the army system was itself discriminative a system which we thought we wanted to abolish we were now serving under it.”
P01 also said “We are now employed as security guards because it is believed that we do not have other skills except combat skills, or neither knowledge to take up a better job. No one is willing to give us jobs even our own government who we fought for. I do not have education to be employed in the formal sector because of the struggle and our government does not pay us grants until you are 60 years for army veterans’ grant. We truly have no one. We are meant to compete with people who stayed behind and further their studies, although we made major sacrifices but the government and private sector does not show appreciation.”

In addition to issues around family, community and work, concerns related to spirituality, schooling, and psychological well-being also emerged amongst the ex-combatants, as the comments below show. Almost all the respondents believed the church is discriminative towards them. They believed that the church is doing very little to serve the interests of ex-combatants. They believed the church does not want to associate with them because of the taboo that the ex-combatants had been involved in violent actions. In particular, they felt that because of the nature of the armed struggle churches are suspicious of them.

P08 stated “During the struggle we opposed churches because we believed their teachings were teaching our people submissiveness. Secondly we also opposed churches because of its colonial history. The church now is sceptical of us and is very suspicious of our motive when we ask help from them.”
When examining how the respondents felt about schooling and educational institutions it was established that here too they felt marginalised. The ex-combatants believed that these institutions did not cater for their needs, nor did they consider their prior learning.

**P03** explained “I was both very worried and scared with the statement made by our former president Mr. Nelson Mandela in his statement soon after his inauguration as a president in 1994, when he said “Freedom shall be better enjoyed by those with education. This statement worried me because this country was liberated by both educated and illiterate equally. During their recruitment for the armed struggle they never requested qualifications from us. We are alienated by our education system because at lower, secondary and high schools level we cannot be accepted because of our age. At universities they do not recognise our prior learning, as compared to other people, for example I enquired at another university and I was told because of the country background someone can be considered for enrolment when they are above 23 years and has work experience.”

**P05** said likewise, “For us, our experience in the army is not recognised as prior experience. Adult Basic Education and Training (ABET) the only educational system where we are supposedly we should study at is under resourced and barely has sufficient teaching material and qualified teachers as a result of this we are not re-skilled. Government is setting us up for failure.”
As regards psychological issues, every respondent interviewed alluded to the psychological difficulties that they were experiencing in their lives. Their emotions included anger, symptoms of post traumatic stress, aggression, paranoia, relationship difficulties, mistrust, difficulty in adjusting to family life, stress and depression-related symptoms. The respondents expressed other specific symptoms like nightmares, and substance abuse.

It was clear that after all their violent experiences the respondents had not received any form of debriefing to prepare them for civilian life. They were integrated into civilian life with their traumatic experiences and their violent past. They were never given an opportunity to receive healing or therapy and to find closure from their violent past experiences. The participants said that because of many years in the struggle they did not know how to be civilians again but had to adapt quickly because they had no choice. Some of the respondents claimed that when they came back they did not know how to be husbands and fathers to those they had left behind.

Some said that this was the greatest challenge, because it was as if they were living with strangers when they met their families on their return. From this it can be confirmed that the respondents functioned better in their ex-combatant life as they believed that they no longer fitted in with their families. These feelings were exacerbated because the community and their families perceived them as strange, because of the after-effects of combatant life and military regimentation.
Some respondents admitted to the use and abuse of substances like dagga and alcohol and showed dysfunctional behavioural patterns because they did not know how to cope in their new lives. Their situation was made worse by the traumas they are carrying from their experiences, their present hardships, and the loss of social status in their families and communities. Some participants indicated that their experiences had affected their family life, as family members were afraid of them as they sometimes displayed violent tendencies because of their frustrations related to their social position.

**One participant, P08 noted that:** “Ever since I returned from exile I noticed that, I have totally changed. Before I joined the struggle I was a loving father and husband, now my whole family is scared of me, because of my status [reputation of being an ex-combatant]. They are afraid of me, and now I am not approachable to my family members.”

**Another, P04, stated:** “At home they always run to authorities whenever we had an argument, they claim that I am dangerous and that I have weapons. One time my wife told the police officers that she is afraid of me because, I might lose it one day and kill her and the kids as a result of my aggression. I sometimes become very frustrated whenever I do not have money or means to support my family and children, I think of taking my life and taking my wife and children with me.”
As in accordance to the respondents responses it is evident that they did not receive any counselling for their past experiences, and that they were not prepared for reintegration into civilian life. As a result of this they displayed clear indications of frustration during the pre-interview stages. This was aggravated because they were not equipped with coping skills and there were no support services available from their families, communities, government or non-governmental institutions.

4.3. The process of ecotherapy

Central to the design and process of ecotherapy is the understanding that the physical obstacles, challenges, achievements, and their parallel psychological and spiritual equivalents, are part of the same patterns of growth, empowerment, learning, and healing (Glasser and Hertz, 1999:13). The ecotherapy trail for this research process, with specific reference to healing amongst respondents, is discussed below, under the following four stages:

1. Preparation stage (Screening and pre-interviews with respondents)
2. The ecotherapy journey (Facilitating growth, empowerment, learning, and healing)
3. Returning (Post interviews: physical and psychological transition, and releasing versus accepting)
4. Internalising (Outcomes of the focus group, and facilitating self-care).
The figure below identifies this process of the ecotherapy change process.

**Figure 1 : ECOTHERAPY CHANGE PROCESS**

A process of healing, encompassing a solo session (individual meditation), in-depth sharing session, adventure activities, and group discussion exercises, were employed as part of the ecotherapy and healing process (An in-depth discussion of the programme and process of the trail was given in chapter three). An analysis of the data recorded during the ecotherapy trail is examined in accordance with this change process, as illustrated in the diagram above.
1. Preparation stage (Screening and pre-interviews with respondents):

The respondents felt supported during this initial stage, noting that they found the facilitator to be patient, supportive and kind to them. Furthermore, the respondents said that during this stage the researcher helped in reassuring them that what was being ventured into was beneficial to their livelihood. The respondents recorded a positive self-evaluation and introspection as proceeds of this stage.

One participant P03 stated, for example, “The facilitator was open and honest, he shared his personal experiences and it really helped. Additionally, he was open about what we should expect from the programme and what it takes to gain and benefit from the process.”

The respondents also noted that, the pre-interview stage made them think and confront their situation. For the first time they could admit to themselves that they lived dysfunctional lifestyles, and that they needed help.

2. The journey (facilitating growth, empowerment, learning, and healing):

The respondents said that they gained a sense of self-worth as they went along the ecotherapy trail. During the trail, the respondents described an increasing desire to complete the process, and expressed a developing sense of appreciation of participating in the ecotherapy trail.
P06 expressed “Being alone in a solo meditation gave me an opportunity to evaluate my life journey entirely. I am grateful to the program for giving me sense of ability, like I can do it.”

Some respondents said that, for a very long time they had always heard criticisms and not much positive feedback, but during the workshop they were encouraged and supported. For Gear (2002), the natural environment in which the ecotherapy is conducted usually leads to an interest in talking, reduces defensiveness, and fosters curiosity while significantly encouraging mutual trust. This decreases respondents’ anxiety and allows them to set the pace, as well as to determine their limitations. The respondents recorded cognitive skills development, as assessed by the facilitator, in that they started to think constructively about their lives and not to look to blaming others for their circumstances and problems.

P03 said “I saw other behaviours; and interacting with people who have the same experiences and problems similar to mine and to communicate on equal level and honestly. Being with people who are similar to me to get healing and closure and new beginnings was crucial.”

The respondents said that the journey gave them a sense of community and of brotherhood. Being away in an open environment with no stress or worries gave them time to reflect.

P02 stated “Appreciation of the space to reflect on our lives was crucial for our introspection. The process of the journey opened my eyes to what I had in life and taught me to appreciate things I have, my family, even little things.”
The respondents found that the process and the programme was therapeutic and the structure of the healing process was easy to understand and follow, as P01 indicated. **He said** “The order and structure we had, the events and phases of the healing process gave me peace.”

Furthermore, the respondents stated that trailing the mountain, living in nature, group activities, and having a solo session in a positive and healthy natural environment helped them to bond with one another, because it was as if time had stopped. According to Glasser and Hertz (1999) ecotherapy is an approach that draws on the natural environment to bring about benefits to our development, health and wellbeing. The respondents said that living in a natural environment gave them time to think as compared to the fast environment of the township where one can barely think about their feelings. **P05 said that**, “I think the wilderness living in a clean environment helped me, I needed it to take care of myself.”

The respondents further expressed appreciation for the facilitators patience and understanding. They confirmed that the group discussions were helpful, as **P03 said** “We really looked up to our trainers and we were able to connect, with one another as ex-combatants.”
3. Returning (Post interviews: physical and psychological transition, releasing versus accepting):

After the respondents had been through the ecotherapy intervention and gone back home, the researcher later followed up with post-interviews and a focus group session. The aim was to observe the extent of healing and reconnection that the respondents had received from this model. As part of this process, the researcher also assessed the participants psychological, social, behavioural, and relationship development as a result of the ecotherapy intervention. The ex-combatants reported feeling relieved after participating in the trail. Almost all of them said that the ecotherapy helped them to put things, and their lives in perspective, and that the healing process had forced them to face their traumatic past for the first time in many years.

The respondents also said that the healing process had encouraged them to further deal with their traumatic past and to resolve dilemmas like their emotional functioning, fundamental to rebuilding their lives. Other ex-combatants stated that they were able to face the fears and doubts that they had been carrying around through their adult lives. Some of the ex-combatants said that their view of the world had changed from being pessimistic to feeling hopeful of what life could bring their way. Some described a positive change in their coping ability, and in dealing with problems related to nightmares and substance abuse. One participant, P08 explained, saying, “For the first time in many years I felt free from my ex-combatant life that I am my own person and being an ex-combatant was a consequence of life. The ecotherapy healing workshop has given me freedom that I have been longing for and it has given me my life back. I used to consume lot of alcohol before going to bed to avoid having to thinking or dream of the past.”
Other respondents said that they were always angry with people, with their community and the government, but now they were beginning to learn patience and openness while some said that they had developed an internal power and therefore do not externalise their problems.

**P04 confirmed this development saying,** "Since I was exposed to ecotherapy I now take responsibility for my life and future. From the healing process, I learn to look inside myself for solutions and the betterment of my life. I am no long waiting for government to come to rescue me; I am now making means to change my life for the better."

Most of the ex-combatants described the healing process as tough because it forced them to deal with their trauma. They said that, because of the nature of the ecotherapy programme. They were able to share experiences in a comfortable environment because the respondents were all people who had shared the same history, experiences, and hardships. For Gear (2002), ecotherapy has a sense of unifying people and tends to allow people to share experiences. The respondents stated that they were able to share in a comfortable and safe environment, and at the same time learn from each other. They had never had an opportunity before this time to discuss their feelings regarding their past with people who were in a similar situation. They further said that their communities expected them to be tough and not show emotions, but in reality, they felt vulnerable and insecure. Now, however, they generally felt positive and hopeful about the country and about their lives, since the intervention.
**P02 explained, saying that** “I always discuss politics and complain about the status quo of the country whenever I am around other ex-combatants, before we hardly discusses our feelings. During the trail, we were compelled to discuss how we feel and break false pretences. I am now hopeful, and I engage in constructive things in life because I feel there is a place for me and that there are people that care. Since the intervention, I am no longer feeling depressed, paranoid, inadequate, and angry, I feel at ease with my situation. I feel grounded and in contact with my emotions and spirituality.”

Likewise some respondents said that they felt a sense of worth which they had not felt for a very long time. Other ex-combatants felt that they had learnt to rely on others and themselves. As participant **P03 noted**, “I use to blame everything to the government and not taking responsibility for my life. Ecotherapy has given me my life back. I now know the meaning of true empowerment because I feel empowered and invincible.”

The ex-combatants noticed that they were now able to focus and to think about difficult things and life. **P06 stated**, “Before I got healing and reconnected, I did not acknowledge my thoughts. I always wanted to be around people or under influence of substances or keeping busy to avoid engaging with my thoughts, and facing my fears. But with the help of ecotherapy I am able to allow myself to think and face my deepest thoughts whether they are painful or pleasant. I believe this is because I have found reconciliation and healing, my feelings and thoughts about my life do not hurt me anymore instead I acknowledged them as a journey I once took in my life.”
In the follow-up sessions with respondents, in an interview, one of the respondents mentioned that the ecotherapy trail allowed him to develop a sense of self-development, accomplishment, positive self-esteem, and self-confidence. Respondent P04 explained, “It did wonders for my confidence”. Another respondent confirmed that through the trail he had managed to develop good conflict resolution skills and was now able to deal with conflict situations. He, P01 indicated “It helped me to deal with anger that was built up in me; anger management and to learned boundaries. The exercises and programmes in the ecotherapy trail were not easy, we were challenged to solve problems; overcome obstacles; and deal with group’s dynamics and difficult people.”

The respondents said that the challenges in the trial represented their life before the healing process, and because of the ecotherapy they realise that they can now achieve things in life if they work hard, and are committed. Again, another respondent expressed the opinion that the trail was also instrumental in developing his sense of sound emotional stability, development of compassion, and his ability to be mature and humble. As he, P05 said, “It calmed me down and allowed me to do some thinking.”
4. Internalising (Outcomes of the focus group and facilitating self-care).

In the focus group sessions, all respondents gathered at a common venue and were interviewed as a group regarding the potential benefits and natural changes they had noticed amongst themselves since the trail and the last individual interviews. There was consensus amongst the respondents that the trail and the experience had helped them to reconnect with their families and to develop a new outlook of life.

**P07 expressed this outcome, saying** “**Before we were staying with our families, but the healing process helped us to live with them and be present in every respect. Before we were detached from their lives and we did not know how to relate to them, but now we have taken the first step of reconciliation and rebuilding broken relationships. We think the experience helped us to listen, and pay attention to the people who are important to us, without being negative and we definitely needed that.**” The respondents agreed on the fact that they are now more positive about life and have taken responsibility for their lives, and seek opportunities rather than being pessimistic.

Therough the process of ecotherapy, there was a transforming healing power amongst the participants. Here **P08 noted** “**Your mind changes, you think about something that is positive in life.**” From the positive views that were expressed in group sessions it can be concluded that the opportunity to leave the township and to go on a healing process for days was enjoyed as a transformative event.
All the respondents considered the ecotherapy trail an intense and meaningful experience. A few participants even described the healing process as a turning point in their life. Some claimed to have achieved the cessation of their nightmares; others simply emphasised that it had helped them to find out that there was something they had to work on. **P03 said that,** “I think that this trail is good for people who are coming from similar situations. Just going there, seeing nature and the environment it brings something new both physical, emotional and mentally.”

Listening to the interviewees it became evident that everybody was confronted with fears at some point, as **P05 noted,** “I wouldn’t lie to you, when I went there, I had stress.” The respondents said that they were afraid of engaging in the programme because of the fear of facing their past. Other respondents said that they were concerned about being on a trail with people who belonged to different structures of the liberation movement, like APLA, MK, SDU and SPU. This was because they viewed them as their enemies, particularly because of conflicting political philosophies and ideologies.

As the respondents started to trust the process, the dread of being ideologically criticized, or of conflict with opposing respondents seemed to diminish. However, strong feelings of insecurity or stress were produced by other challenges, such as unusual physical tasks, the unknown environment, the imagination of wild animals, or the simple fact of being far away from their families and friends or their comfort zone. According to Gear (2002), ecotherapy gives one an opportunity to notice the surrounding environment, regardless of season; it encourages self-awareness, and provides one with many directional options. Thus ecotherapy has a sense of unifying people and tends to allow people to share experiences.
Many participants described the forest, and staying alone in the dark, to have been a struggle, and often as their fight with their inner self. Jointly they perceived the return from the forest as an empowering moment providing them with a new sense of strength, courage, and self-esteem. 

**P02 stated,** “Now I trust myself that I can do something that is difficult.”

The responses especially mirrored the self-confidence they had gained. One of the respondents explained how his physical and psychological challenge led to a new self-image, which still lasted and helped him after the trail.

**P08 indicated** “Even when I am facing a life challenge I remind myself about the difficult moments in the trail and how I coped with it and I told myself if I coped in the forest why can’t I cope in my home life with all the resource. Unlike in the forest I had to cope with almost no aids around me. I start by believing in myself and telling myself it is not someone else life it’s my own life, failure is not an option.”

Some of the participants who knew themselves to be extremely short tempered before they went on the trail, claimed to have found patience and self-control. A few respondents also reported that the self-control they had gained, and that the support received after the ecotherapy trail encouraged them to manage their behaviour well, and to control their bad habits. It is evident that this establishment of new connections with their sense of self is not restricted to the ecotherapy experience but will flow into other areas of their lives.
Other participants said that they had discovered new capabilities which they did not know they had. As Robertson (2007) confirmed, an ecotherapy trail can prompt participants to reflect on their lives.

Many comments from the participants indicated that this kind of therapy supplied them with courage to abandon their old lifestyles. Far away from the daily stresses of the township, and able to think about themselves, they could bring out their hopes and wishes, and develop a vision of their future. All in all though, most of the responses concerning the rediscovery of self, centred at first on withstanding and overcoming the physical and social challenges. Only one respondent stressed from the beginning that the trail primarily encouraged him to reflect about himself and his aims in life. This participant, **P01, said** “The most thing I found being valuable about the trail for me was the opportunity to think about myself; where do I belong; what do I want to do with my life; and where am I going?

This participants view needs to be seen in the light of his biography. He was discharged from the SADF because of misconduct in 1996. Recently, he lost his security job because of substance abuse. When he went on the trail in 2007 he was kicked out of his house by his children and wife because of his drinking problem and violent outbursts. He had also discovered, just a year ago, that he is infected with HIV. After the trail, his outlook on life had changed and he was beginning to seek information regarding his illness and was willing to seek help for his alcohol and drug abuse problems. His social situation has not changed significantly, but the opportunity to think things over and to plan for a better and healthier future highlighted the contribution of the programme.
Etzioni (1991:234) notes that personal projects and strategies, as intervention mechanisms to change things in one’s life, generally tended to be about a return to school, applying for vocational internships or starting a small business. This view was evident in the situation of one of the respondents. After the trail, he said that his first mission was to re-establish a relationship with his family and to try to educate and explain to his children why he had to leave them when they were young, and join the struggle. In other instances the respondents, besides planning future projects, translated parts of the trail experiences into a personal philosophy of life or a strategy to cope with life. The new connection with themselves often enabled the participants to change their attitudes and relationships in the community. Some respondents were convinced that the positive energy they spread after the healing process had also positively influenced the lives of their families and communities, because of their change in attitude and the positivity they represented.

The formal group discussions, as well as the informal exchange about traumatic experiences and present challenges, are appropriate and essential vehicles of the ecotherapy healing process (Davis and Berman-Berman, 2007). All of the respondents affirmed that talking to one another and sharing the memories of the past were important aspects of the healing process. Their ideas of, if and how, one should talk about the past can be linked to their trail experience and the key concepts of the project. Initially the respondents found it difficult, painful and frightening to tell their story. Some respondents explained how they drew strength from those who were brave enough to share their stories before them.
They then felt comfortable to share their experiences too. Other respondents said that they were weary of being judged, feared revenge through legal consequences and needed a long time or several occasions before they were able to reveal everything that haunted them. However, because of the confidential nature of the trail they felt safe to begin to talk about their experiences. Against this background, it is not surprising that most participants agreed that the disclosure of the past helped in facilitating trusting relationships. The concept of trust is presented in many of their responses about the past. Four core outcomes that respondents repeatedly identified were cathartic relief, personal growth, educational purpose and spirituality and traditional healing rituals.

The idea of cathartic relief reminds one of the concept of release through story telling, fostered by the Truth and Reconciliation Commission (TRC) (Mpahla, 1997:44). In a similar way, several participants reported leaving behind the anger and hatred through the trail experience, and emphasised the cathartic effect of releasing emotions, and the danger of keeping bad feelings and memories locked up. One participant P04 noted “When I spoke about my pain and I got a relief and I felt like I left everything and my baggage in the mountains.”

According to Schell-Faucon (2000:91) the past is perceived as containing painful elements that hinder people from moving on to find healing. Many participants associated the message of leaving the past behind and moving on, with the ecotherapy healing process, with the closing rituals and reflecting on the process and evaluation related to concentrating on forgetting the past and looking to the future.
On the trail, the facilitators noticed how the participants outgrew their personal initial difficulties of talking about the past by realising that every time they shared their personal stories new aspects and perspectives arose (Robertson, 2007). The participants explained that they often learned from the exchange and the comparison of the different experiences that others shared, precisely because they were in a safe environment where confidentiality was emphasised.

Participants further felt that the programme was crucial for community rehabilitation and forgiveness, and for the people in the communities to know what had happened during the time of the struggle, from the participant’s perspective. This way of talking about the past implied an educational function, while at the same time allowing a positive reframing of painful and ambiguous experiences. As one participant P02 said “I like explaining to somebody what happened, I want people to learn and to know from being a bad person to be a good person it take a lot of courage, it takes the lot of energy, pain, admiring somebody, putting yourself into somebody else shoes. Indicate somebody that this is a good way; this is not a good way, that’s what is exciting about the experience. It gave me a sense of purpose in life, to give people insight into our lives.”

In terms of spirituality and traditional healing rituals, some participants mentioned that they drew their energy from their religious faith in God. Others said that they believed mainly in the spiritual power of the traditional healers. The wilderness was perceived by most participants as a spiritual place. The rituals included in the project accommodated the different beliefs of the participants, but as one participant P01 stated “Wilderness is a place with the power of the Lord and that of the ancestors meet for the healing purpose.”
5. Summary

The ecotherapy trail is one stage on the journey towards healing. It is a trigger, or starting point, of the healing process, and many participants described their experience in this manner. When asked about events and conditions that prompted their participation in the ecotherapy trail, it became evident that respondents had a clear and innate motivation to receive healing.

The physical challenges, attaining of self-confidence, and connecting with others as well as their inner self were also relevant. Some respondents, however, did identify previous efforts they had made in order to change their situation. This does not mean that the ecotherapy healing experience was of minor relevance to them. On the contrary, it reinforced the growth of these participants to cope with the process overall. In essence, the project flexibility and the unpredictable circumstances were a major part of the ecotherapy journey that for some was the starting point of the healing process, while for others it was an on-going effort towards transformation. Thus, the stages of the ecotherapy process and the application of the experience of the ecotherapy by the respondents into their daily lives make up the healing process.
CHAPTER FIVE: DISCUSSION AND CONCLUSION

6.1. Introduction

This chapter presents discussions and recommendations of this study on the use of ecotherapy as a healing technique. A set of themes are outlined below and the study concludes with a recommendation on ecotherapy as a mechanism to assist in post trauma counselling amongst ex-combatants.

6.2. Use of ecotherapy for post-conflict healing

According to Firtzgerald (1997) ecotherapy is a powerful and effective way, individually and collectively, to work on trauma, stress, and depression. It is well known that the major symptoms of stress, depression or mental illness are the breakdown between a person and the people around him or her. Furthermore, Firtzgerald (1997) notes that through ecotherapy social, economic, psychological, emotional, and spiritual wellbeing can be positively affected. The impact of ecotherapy highlighted in this study indicates the “catalytic potential” of ecotherapy to enhance an individual’s healing process, corresponding to the specific needs of the former militarised participants.
For Gear (2002), ecotherapy is a healthier substitute than taking anti-depressants and other pills. According to Abrahams (2006), the true benefits of ecotherapy in post conflict healing are that it has the ability to serve as a means to achieve conflict resolution and clear communications skills, and to facilitate indigenous ways of knowing and a democratic way of helping. In addition, it supports practical psychology, group therapy, and restorative justice.

In accordance with the aims and key concepts of ecotherapy, the respondents’ feedback reaffirmed that the ecotherapy trail provided an outstanding opportunity to establish new connections with the environment, with others, and with themselves unlike conventional therapies that only focused on individuals. Part of the ecotherapy potential of transforming trauma and conflict appears to revolve around the idea of deconstructing stereotypes and bridging boundaries that the particular conflict in the individual’s past has generated (Russell, 2000).

The researcher’s assessment of the findings, the research process, and its impact suggest that further potential and challenges lie in the following opportunities prompted by the study:

6.2.1. Creating an encounter where concerns about the past and the future meet

According to Schell-Faucon (2000), reconciliation as a concept and praxis has to seek innovative ways to create a time and a place to address, integrate and embrace the painful past so as to create new identities as means of dealing with the present.
The participants’ responses suggested that the ecotherapy represented one possible form of providing such a safe space that allows the participants to express their memories of pain, loss, and trauma. This point of encounter of common concerns and experiences represented the necessary ingredient for reframing their situation.

6.2.2. Initiating new citizenship and shaping community life

Since another value of the process lies in the return, it was crucial for project managers to emphasise that more attention should be given to this part of the programme. Coming back from the journey participants tended to be very enthusiastic about their new experience. They wanted to preserve their new sense of community and wished to share it with others. Harper and Colley (2007) indicate that, if the community is to benefit from this new positive energy, it is essential that the participants do not find themselves left alone with their newly acquired experiences, personality, thoughts, and skills.

6.2.3. Providing a holistic approach

From reading their experiences on the trail, the addressing of social and emotional scars means more than just integrating ex-combatants within their communities. Opportunities for healing for an individual at interpersonal and communal level must be provided. At the same time, most of the respondents expressed the urgent need of immediate income, and the desire to acknowledge their personal contribution to the struggle. This suggests the urgent need for the developmental response and holistic healing approach that tries to integrate the respondents within their communities by re-establishing their former status and offering them skills in order for them to be self-reliant.
7.1. Discussions

Fundamentally, the most important objective of this project was to assess the potential benefit of ecotherapy as a therapeutic model for post-conflict healing amongst ex-combatants. The research was intended to assess candidates outside their usual environment through an ecotherapy trail designed to be therapeutic. It aimed to attain what Russell (2000) describes as impartial and cumulative, with each ex-combatant’s experiential element contributing to maximising the reconnection and empowerment of the ex-combatants to their inner self, and to ultimately influence their perception of the external world (Russell, 2000:62).

The research findings can serve as a guide to governmental and nongovernmental organisations that are working with ex-combatants to minimise the effect of social hazards affecting ex-combatants by taking informed management decisions on the long-term involvement of ex-combatants and former fighters in community development initiatives. This work can also be a guide for intervention with other like groups in the community who suffer from violence, PTSD and related conditions. Thus, this information can be used to continue to change and make alterations when dealing with ex-combatants from different areas who suffer from similar experiences and problems relating to violence and trauma.
7.2. Two approaches to ecotherapy

There are in essence two approaches to ecotherapy. One is earth-centered and teaches that working with the natural for therapeutic purpose will help remind us that we are a part of the interconnected world and not its dominators. When one can actually feel as though the earth is part of oneself, it becomes easier for us to do things that can sustain and heal the earth (Russell, 2000).

A second path in ecotherapy is a person-centered approach where the ecotherapist recognises that first the individual needs to be treated. Using nature as a means for reflection, the individual is encouraged to reconnect spiritually with the sustaining earth.

Glasser & Hertz (1999:57) note that, although some of the ideas on ecotherapy seem obvious, some deeper philosophical and technical aspects deserve reflection, learning, and discussion. In this regard, ecotherapy could be an important part of the treatment used by mental health professionals in the present and future. With this group, it has proved a credible treatment option that practitioners, in helping the environment, can use especially for groups of individuals in need of psychological treatment, and where to access treatments other than anti-depressants and individual therapy is extremely limited.
Furthermore, this option is cheaper than anti-depressant drugs. Walking in the countryside has no side effects. Below are other potential benefits of ecotherapy, as confirmed by both participants in the programme and mental health therapists who use this technique (Schell-Faucon, 2000:108): These benefits include

- Physical (increased strength/energy level, reduced tension).
- Emotional (improvement in self-esteem and self-image and having a more positive attitude).
- Cognitive (improved concentration and memory).
- Problem-solving (Ability to generate creative solutions and be open to new perspectives).

7.3. Fostering hope

The researcher does not suggest that psychological intervention like ecotherapy will solve all the integration and therapeutic needs that this township of Mdanstane or ex-combatants have. For the researcher, ecotherapy intervention is, however, an important aspect and should not be excluded or ignored from reintegration and therapeutic processes available in helping professions. Based on the findings of this study, the researcher is of the view that ecotherapy provides practical solutions for the rehabilitation and reintegration of ex-combatants back into their communities. This is primarily because attempts made to recognise ex-combatants have occurred at a national level in South Africa, with the focus on high profile leaders in the army (Firtzgerald, 1997). But equally important are ceremonies that recognise and honour ex-combatants at local level, with the communities actively involved in the process.
This will assist in restoring the dignity that these ex-combatants need and also enabling the community to learn about the sacrifices that they have made. In addition, campaigns to raise the awareness of the experience of ex-combatants should take place at local and national levels. This awareness raising should be directed at community levels so as to remove the myths and prejudice that exist in communities about ex-combatants.

The strengthening of support systems must also be community oriented. Communities, including families, friends, and neighbours are central to the healing process of ex-combatants. These people, who form the basis of the support system of ex-combatants lack knowledge about war trauma and do not know how to support them. In order to deal with the rejection and stigmatisation of ex-combatants, psycho-educational workshops on war trauma and how to support ex-combatants, should be held within local communities.

7.4. Recommendations for Practice

Ecotherapy sees the healing of the human relationship with nature as central to mental health. Thus ecotherapists need to find ways of helping people absorb what is happening in their lives and find constructive ways both psychologically, practically to respond to their crisis and trauma. Accordingly, ecotherapy can help in facilitating deep transformation, education, and healing by helping individuals and groups establish consciously beneficial relationships with themselves, relevant others, communities and with nature. For this reason, within the ecotherapy discipline there are practitioners who teach and practice ecotherapy exclusively, while many mental health professionals are now incorporating aspects of ecotherapy into their existing practices.
The reason for this is that ecotherapists have a variety of ways to help their clients to re-connect with nature, place, and to experience a profound sense of reconnection with themselves, others and the environment. In closure by utilising group activities to one-on-one therapy, to working on restoration projects, ecotherapy practice has proven an effective means to deal with trauma and many other conditions that are the result of trauma of the modern, industrialized world.

As relates social work, social workers as healing practitioners, community workers, educators, advisers, activists, and consultants could likewise integrate ecotherapy practices into their work. Consequently, it is reasonable to believe that ecotherapy can be utilised in social work education, within social work practice, and in the educational practice for social work students. This practice of ecotherapy in social work could facilitate education on sustainable development, individual therapy, group therapy, community development practice, outdoor education, and in environmental awareness. The researcher would recommend therefore that:

- Ecotherapy be integrated into the curriculum of social work programs
- Social work focusing on personal and community development actively include ecotherapy in its intervention and practice
- Social workers facilitate processes of ecotherapy in their work when working with victims of trauma especially ex-combatants of the liberation struggle.
8.1. Conclusion

The research was designed to produce data on ecotherapy as a technique to help ex-combatants heal while dealing with past traumas, which resulted in them living counter productive lives. The researcher believes ecotherapy can produce positive results for those who suffer from combat related trauma.

Government, Community Based Organisations (CBOs), Non Profit Organisations (NPO) and Non Governmental Organisations (NGOs) should become involved in therapeutic projects similar to ecotherapy when working with ex-combatants, marginalised groups and victims of trauma and violence.

This research on the ex-combatants healing; provides an example of the integration and empowerment by a private institution (National Peace Accord Trust) in working for the public benefit. A growing number of therapists and outdoor education workers have seen the vast benefits of working in, and with, the natural world making ecotherapy a well established concept (Capra, 1982). However, in South Africa this is a new field. There are many layers that we can work on and take a broad holistic and integrative view of how nature can work in harmony with our own healing.
This means that we acknowledge the mind, body and soul connections with nature, and bring this to an integration of approaches from modern therapy as well as more traditional methods. The above points can be followed as part of a conclusion to understand the application and implementation of ecotherapy. In all interviews, it came through that for ecotherapy to be successful and feasible, enthusiasm, commitment, persuasiveness and personal investment are necessary, from both the respondents and the programmes facilitators. In the light of the above information and the respondents’ testimonies and the findings of the study, these represented the most convincing evidence that ecotherapy can work.
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<tr>
<th>Abbreviation</th>
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<tr>
<td>ABET</td>
<td>Adult Based Education and Training</td>
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<tr>
<td>ANC</td>
<td>African National Congress</td>
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<td>APLA</td>
<td>Azanian People’s Liberation Army</td>
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<td>African Union</td>
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<td>AZANLA</td>
<td>Azanian National Liberation Army</td>
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<td>Community Based Organisations</td>
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<td>CSO</td>
<td>Civil Society Organisations</td>
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<tr>
<td>CSVR</td>
<td>Centre for the Study of Violence and Reconciliation</td>
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<td>DDR</td>
<td>Disarmament, Demobilisation and Reintegration</td>
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<td>DOS</td>
<td>Development of Self</td>
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<td>National Peace Accord Trust</td>
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<td>PCRD</td>
<td>Post Conflict Reconstruction and Development</td>
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<td>PTSD</td>
<td>Post Traumatic Stress Disorder</td>
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<td>PTSDS</td>
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<td>SADF</td>
<td>South African Defence Force (pre-1994)</td>
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<td>SANCO</td>
<td>South African National Civic Organisation</td>
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<td>SDUs</td>
<td>Self-Defence Units</td>
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<td>Acronym</td>
<td>Full Form</td>
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<td>Self-Protection Units</td>
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<td>TTP</td>
<td>Trauma and Transition Programme</td>
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<td>TRC</td>
<td>Truth and Reconciliation Council</td>
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<td>UN</td>
<td>United Nations</td>
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<td>37</td>
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As a result of the protests and burning all government institutions (schools/clinics/Civic Centres etc) this participant stopped schooling in standard 8. Currently, he is unemployed and married with three children. He survives with his family through a child support grant received by his wife for two of his children and also does piece jobs around his community.

| Participant | Age | Gender | Date of Birth | Organisation | Grade | Participant 02: (DOB: 1969/08/03): was born in Mdanstane Township. As a young man of fifteen he ran away from home, to join a group of younger men who were crossing the borders to go and seek military training under Azanian People’s Liberation Army (APLA) in Libya.

According to participant 02 there were many reasons for the youth to leave their homes at the time. Part of these reasons was the quest for freedom, and part of that was driven by the constant harassment from the apartheid agents.

Participant 02 left school at a very young age to join the struggle and stayed in exile approximately 20 years. He returned to the country in 1989 and joined the newly formed South African National Defence Force in 1992. |
He claims to have served 4 years under the SANDF before he decided to discontinue due to being de-ranked, and alleged discrimination by uMkhonto we Sizwe led Commanders. Participant 02 took a package in 1996 and left both the politics and the army. He is currently, living with his live-in girlfriend with their four children. He is currently employed as a security guard and does not have other sources of income.

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 unborn in Mdantsane Township. Like most young men at the time participant 03 fled home to join the armed struggle under Azanian People’s Liberation Army (APLA) in Libya. For this participant the only option was to join the struggle and fight for the liberation of his country. He claims to have been involved in numerous sabotage missions that took place in the country.

Upon his return this participant joined the SANDF until he took a package in 1999.

Currently, he is unemployed and is living with his wife and three children. The family survives through government grants and a small vegetable shop his wife owns.

Participant 03: (DOB: 06/07/1959): was born in Mdantsane Township. Like most young men at the time participant 03 fled home to join the armed struggle under Azanian People’s Liberation Army (APLA) in Libya. For this participant the only option was to join the struggle and fight for the liberation of his country. He claims to have been involved in numerous sabotage missions that took place in the country.

Upon his return this participant joined the SANDF until he took a package in 1999.

Currently, he is unemployed and is living with his wife and three children. The family survives through government grants and a small vegetable shop his wife owns.

Participant 04: (DOB: 18/11/1972): The participant family is a renowned family in the township struggle history. The participant father was a well know member of APLA, and as a result of this the participant family was constantly harassed by security forces.
According to this participant, “because of this reason his family could not live in peace”. Participant 04 only knew one way to liberate the people, which was to take up arms. This is what participant knew and what he believed in. As a result of this after serving in the Self Protection Unit as a marshal during the late 1980s he could not believe that the country would be freed without war. When the opportunity presented itself in 1986 the participant “skipped” the country and joined his father and his brothers in exile.

Upon his return from Mozambique in 1990 he joined the newly formed South African National Defence Force. The participant took a package in the SANDF in 1998, as a result of discrimination and poor career prospects. The participant never returned to school and is currently unemployed.

Participant 05: (DOB: 1968/06/15) Once an ANC activist and former exile of uMkhonto we Sizwe. This participant is a man with a personal history that is resembled by both strong political history and long criminal activities. This participant is among the first people from the township to be recruited to the armed struggle. However, his political life was short lived after he terrorised his community by committing very serious offences and was soon jailed and released after he had served a long jail sentence for breaking the law.
The participant is currently unemployed, and survives with his girlfriend through doing piece jobs in his community. One wonders if this participant could have had education, maybe things could have turned out differently for him.

Participant 06: (DOB: 1970/09/11) was born in the township of Mdantsane a township that was under the homeland of Ciskei. He was the fourth child amongst seven children of a prominent businessman in the township at the time.

Although his family was well-off, and was attending good schools the view of oppression and struggle prompted him to defy his father and join a black consciousness youth movement.

This journey which he took with conviction saw him crossing the South African border to Lesotho. In Lesotho, together with the group of youth from all over the country, they fled to Mozambique, and eventually Libya where they were taught techniques in military warfare. This participant like many other military youth returned to South Africa during the dawn of the release of Mr. Nelson Rolihlahla Mandela. This participant and his unit were integrated into the newly formed SANDF but absconded in 1995 due to what he called discrimination and being de-ranked. Currently, he is unemployed and receives a government disability grant.
<table>
<thead>
<tr>
<th>Participant : 07</th>
<th>58</th>
<th>M</th>
<th>02/05/200706/05/2007</th>
<th>MK</th>
<th>STD 10</th>
<th>Participant 07: (DOB: 28/05/1952) born in Ginsberg Location, Ciskei. His father was a textile worker in Dimbaza Industrial Zone. During his matric at Lovedale, 1969; he was exposed to literature written by many prominent freedom fighters, and also witnessed the oppression and the hardship to which his family and community were subjected, so he decided to join struggle. In 1972 he fled South Africa and went on military training in Angola under uMkhonto weSizwe. He returned to South Africa shortly after Mr. Mandela’s release. He joined the newly formed SANDF and in 1998 he took a package from SANDF. Currently, he is living with his wife and his five children. He survives with a pension payout he receives from government.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant : 08</td>
<td>41</td>
<td>M</td>
<td>02/05/200706/05/2007</td>
<td>SPU</td>
<td>STD 9</td>
<td>Participant 08: (DOB: 26/03/1969) was born in Mdantsane township. His family moved from Ndileka Village, a village under Ciskei. His father worked for Mercedes Benz South Africa an automobile industry in East London. During his childhood he witnessed how his family, relatives, and friends were terrorised by the Apartheid agents and by the homeland Army. At a young age he vowed to fight for freedom. After the establishment of Self Protection Unit in his community, together with other youth, they did not hesitate to join. The participant served as a marshal through the late 1970s and until the liberation of the country.</td>
</tr>
</tbody>
</table>
Like many youth in Mdantsane at the time the participant never completed his senior certificate due to non availability of schools. According, to the participant the slogan at the time stated: “Freedom first and education later”. This participant is currently not working and survives through the support of his family.

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Gender</th>
<th>Date of Birth</th>
<th>Organisation</th>
<th>Role</th>
<th>Qualification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sifingo Mbona</td>
<td>29</td>
<td>M</td>
<td>02/05/2007</td>
<td>UFH</td>
<td>Facilitator Project Manager/Researcher</td>
<td>Is a Masters Degree in Social Science (Social Work) student. This study is done for submission of his mini-dissertation to qualify for admission in the degree.</td>
</tr>
<tr>
<td>Gavin Robertson</td>
<td>38</td>
<td>M</td>
<td>02/05/2007</td>
<td>NPAT</td>
<td>Co-facilitator Trainer</td>
<td>Mr. Gavin Roberson is a Psychology lecturer at Wits University and is a senior trainer and a training coordinator for the National Peace Accord Trust in Johannesburg.</td>
</tr>
</tbody>
</table>