AGAPE

- a healing community

Stan Lifschitz, Corinne OosthuizenMaxine Linnell

This article is a collage: the story of Agape is told by two of its founders, and italicised sections are Maxine Linnell's account of a day spent there. They flow into each other – but equally can be read separately.

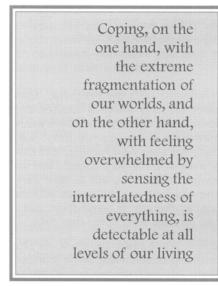
No theory, paradigm methodology or policy can in itself bring about the commitment and involvement called for in the practice of community psychology. Without the often presumed preparedness of the practitioner to be dedicated and to become an integral member of the community with whom she or he works, even the best of metaconsideration will do no more than sound good. In this vein, in a comparative study to try and pinpoint the essential characteristics of effective community projects, the World Health Organisation could only identify one common denominator: the passion of the people involved.

This story is intended to convey how the process of struggle not only creates community, but also generates ideas that shape the way a community psychologist plies his or her profession among people.

I went with a great deal of trepidation – no idea how it would be, what would happen, how I'd feel. Some things I did know. Agape was in a township called Mamelodi outside Pretoria, took place outside under a shelter and some trees, was a place where every member of the community was there for their own healing, and that all were welcome. As a visitor, I was not invited to observe, but to take part. The student psychologists offered regular therapy in some form, but I had no idea what form that took.

When we began to work in the township of Mamelodi some fourteen years ago, we sought out places to practice psychotherapy that would be safest for us, the therapists. We were given sanctuary in a wing of the offices of the local SOS Children's Village. From inside this building, guarded by our diary, we waited for the needy to avail themselves of our services.

In those days our intention was, and it still is, to practise psychotherapy in the townships. So we began by duplicating our ways of working as if all places are the same. Our assumption then, we see now, was that psychotherapy can be applied in any place without regard for context. When we began in Mamelodi we announced our presence and initiated a struggle to declare what it is that we do. This struggle brought about questions about why we were here and what it is that the therapist does. In the township the differences between charity and healing, between being a patron and belonging, were the issues that confronted us continually in the work we were trying to do.



Stan took me on a tour of the township. It was much like other townships I had seen, mostly driven past: small new one-storey buildings built very close to one another, some beginning to be improved and extended, and the squatter camps where enormous ingenuity and cooperation came together to build tiny shacks out of other people's rubbish. Small informal businesses – cafes, hairdressers, public phones, had grown up in constructions along the roadside. The year was 1987. Few whites were to be seen in the townships then. Those who did venture there were noticed and often announced with calls of *lekoa* (white people). It was not unusual then for a white person to become the target of aggression as this single person became the symbol of an oppressive regime. Apartheid was almost forty years old. By then it was increasingly driven by the tyranny of fear and hidden anger that produced processes of suspicion and oppression as it folded in on itself.

Few people in Mamelodi had heard of psychologists or psychotherapy, so we spoke of healing. Finding words to describe the work of a psychotherapist beyond a professional vocabulary and assumed shared meanings, which we had come to accept, brought us to profound points of questioning. We sometimes wondered whether we could do anything at all, or whether we were just frauds.

At this early stage, our uncertainty and sometimes our fear were disguised and translated into sophisticated psychologies, which invariably placed the problem with the clients, the system, the environment, or with the country and its history, anywhere but with ourselves. In this we found comfort and protection from what sometimes felt like an unwelcoming community.

Some people said that they would not come to our clinic because there were whites there. Others came to our clinic because there were whites there. Some came asking politely what it is that we do, and others brought their sick babies swaddled in blankets. Each brought questions, which were also about ourselves and what we were doing. Agape takes place in land surrounding the unused YMCA building. It is squatting on the land itself, and could be moved on at any time. There is a small primary school and a brickmaking project in what amounts to a dusty yard beside a busy road. Agape is two spiralling walls covered in powerful graffiti, and a round unwalled shelter. Agape is mainly the people. Some weeks ago part of the of the shelter's thatched roof was burned down. It was decided to live with the consequences of that for a while to experience its meaning. Everything which happens is held as significant and included in the healing process.

The idea that healing is also for the healer arose from our living across the borderlines of our own safety. It announced a way of bringing ourselves into what we were doing through an acknowledgement and appreciation of our own struggle.

We began to note that our own sense of disconnectedness and lostness was echoed and reflected in the struggle of those who we sought to help. Confessing this first to one another, we began to use our own experiences of lostness as the source of being informed about those who came to see us. In giving voice to our own struggle, we found words to guide us in the hidden worlds of those who had come. And so we found ways of proceeding in the realisation that therapists are informed not by the theories they purport to subscribe to, but by their experiences in the domain of relationship.

By giving words to these experiences in particular situations we found languages of connection and understanding – beyond culture and race – with those who had come. Voices declaring the unspeakable within, in the safety of connection, brought healing to all those involved. In this realisation we rediscovered an age-old wisdom: that healing is also for the healer.

With this expression of faith, which is now part of our credo, we began to form a community with a larger body of healers, some of whom were sangomas and shamans and prophets of the world.

When we arrived it was still early, very few people had gathered, and while drums, plastic plates and a talking stick were unloaded from the car I wandered into the space and immediately felt its power. Fear gave way to overwhelming tears, and I walked round the walls, glad to be alone for a while, reading the graffiti. 'He has Aids and he is still my friend'. 'Agape we love you'. 'Freedom to cry'.

By then many people from different places were coming to talk. Our meetings became a mix of apparent differences, finding commonality in our mutual lostness. The acknowledgement of this allowed for the naming of Agape. The naming arose from a meeting in a room filled with people who had come together to give substance to their meanings of being located in lostness. Someone called out Agape as a name for us through the din of the crowd. Then he left, only to appear four years later, calling our names from the voting lines in the informal settlements where we stood to cast our ballot, then for the first time as one nation.

And so it was in people's continued connection that Agape took form. Every Wednesday we would meet, year after year, talking and talking to those who came to our clinic. Sometimes we would huddle together for hours, acting in ways that revealed our struggle. On other days we would weave through the township, attending ceremonies and rituals, and going into homes. In this way, along unexpected ways, we wove webs of connection.

Year after year we spread in this network, talking about what we do. And what we did kept shifting and reforming, forming community for those who connected with this struggle.

The opening of the day was familiar, except for the setting, By this time about twenty people had arrived, about half from the township. There was no way of knowing who was a volunteer, a student or a 'client'. They were all just members of this community for this time. The chairs were set up as a spiral within the shelter. The spiral is preferred to the circle, as it is always open to people arriving. Spaces are part of the pattern.

It was in the early nineties now, in the last hours before the dawn. Talk on the street was about with whom you belonged. From the pavements people shouted. We were told to join up. The young folk were organising for the day of deliverance. They danced and sang, giving flame to their fears.

It was in the confrontation of all this that we were put out onto the street. The place in which we once found sanctuary told us and everybody else using their space to keep projects going, to leave. Homeless, with nowhere to go, we stood on the pavement with new questions about staying and leaving, and about beginnings and endings. We were lost again. Stan began to speak, holding the talking stick, speaking of the tiredness and anger he was working with. The stick passed round the spiral, each person who wished speaking of their lives, how they felt about being here, joys and difficulties. Others listened attentively.

Then someone offered the use of three zozos, prefabricated huts, just inside the yard of the YMCA next door. So on Wednesdays we sat under the huge bluegum tree in front of the zozos, which were either too hot in summer or too cold in winter. And people kept coming; some limping, some drowning, to sit in the shade with the others who were there.

Little huddles would form, pulled slightly away from the group by the tree. They would struggle together to find ways of being in the eye of the storm. Others would sit in the shifting shade of the tree, talking and dancing and drawing together, mapping and showing the ecology that was forming

After the opening spiral I found myself beside Rachelle, who was at Agape for the first time. She was waiting to be allocated to a therapist, was quiet and nervous, as I was myself. I asked what had brought her here. She told me her storv. She lived with her husband and three daughters, and felt threatened by her husband. He had put some kind of poison into her underwear which burned her, the children were afraid of him, and he followed her wherever she went. A few nights ago her husband had left the window open, and she woke up to find a man in the room holding their television. She didn't mind losing the television, she said, it was only a thing, although it

helped her to stop worrying. She was terrified that somebody would come in and rape the children. There is a belief going round that Aids can be cured by sex with a virgin, and child rape is becoming common. Rachelle wanted to leave her husband, but had nowhere for herself and the children to go. Someone had suggested she come to Agape. She spoke unemotionally but there was a real sense of her fear and isolation. There was nothing I could do to help her situation; I felt the helplessness Stan had warned everyone felt on arrival at the project, that they all still felt sometimes. I told her I could do nothing but listen, and she said she already felt less alone through having shared her problems. She looked lighter. A student arrived to talk to her.

Agape shifted from being only a clinic to being a healing community when we began to acknowledge the different ways in which people come. We recognised that sometimes people came defining themselves as patients or ill simply because this way was the only option we allowed for within our community. We began to realise that people also come in search of belonging or looking for a place where lostness can be shared. In this we also heard echoes of ourselves and of many therapists who came to the tree for reasons other than giving or receiving psychotherapy or treatment.

So we began projects that allowed people to come to Agape in various ways. People like teachers or social workers would arrive, with a variety of ideas, to talk of their work difficulties. We would form groups, composed of those who came and those who were interested or connected to those issues in some way through the details of their won The models we choose or discard do not reflect only our intellectual efforts. They are also the clues as to where our greatest struggles are as people.

circumstances, and encourage these people to meet for as long as they wanted.

I perfected my African handshake, talked with countless people, students, volunteers, group members who had come for help themselves and stayed over the years to help others. I began to see how the chaotic series of meetings and partings formed into shapes. Two or three people would gather somewhere in the shade away from the noisy centre of the spiral where people were drumming and chatting. This would be a therapy session, or a supervision session, as supervision was offered by Stan, Corinne or a volunteer who had originally been a student with the project. She said it was difficult for her to fit in her commitment to Agape, but she received so much from being there that it took priority. This was a feature of all the students and volunteers I spoke with. No money changes hands, there is no 'funding', just as there is no 'building'.

From our weekly Agape meetings under the tree, we would pick up on the issues that were echoing through our various activities. Often waves of difficulty around school problems or sexual abuse would besiege Agape. By collecting those who were touched, we would collectively initiate projects that would take us to the places from which the people reporting these problems had come. For the kids who appeared during school holidays or just through the day, we would form groups to play football or dance, before we sat in a rough circle to talk of their living. Some people who came struggling with meaninglessness and loss would also be connected to existing projects or groups. In this way they would find healing by discovering alternative definitions of themselves as caregivers or parents beyond the definition of patient or victim.

Supervision took place on the spot, in view of the clients. In difficult situations therapists could interrupt their session to have a brief supervision time before re-engaging. Everyone who wanted would be seen during the day, either by their regular therapist or somebody else if the therapist was unavailable. People failed to turn up or were late. It was understood that their lives were not ordered by the clock, and often other priorities needed attention.

We would urge all of Agape to use their talents and skills in all that they do. One member used her love of movement and music, and so dancing became one of the ways in which a healing context was formed for children who were abused. Others would be trained by remedial teachers to give after-hours help to children with learning difficulties.

We would also answer calls for advice, like the one from the retired nurses who had volunteered their services at the home for the elderly. One idea that emerged out of collective talking was to connect these forgotten old men with a local youth drama group who were searching to find life stories that they could make into plays. In these forming and re-forming webs, discarded people could become valuable again as they transformed from being patients to emerge as the story-tellers and the keepers of wisdom.

Much of the time was spent sitting around talking with others. This was not a silent room full of people waiting to be ushered into the presence of the special person with the knowledge – The Therapist. In those conversations people visibly relaxed and began to open up and tell their story. The healing was in the contact, the connection, sharing difficulties and resources.

> A question that theory can be measured against is whether it gives one a language to voice one's own issues, or divert one from it.

All through this time, local and overseas people came to look at our work. We would insist that they participate rather than sit on the sidelines. In doing this we wanted to be true to our idea that community is built on the participation of everyone who is there.

Within all this, our ideas of who were the ones doing therapy drastically changed. We, the official therapists, were being trained by artists, social workers, and many others who had been honed through the difficult circumstances of their lives. And our thinking about the official categories that separate clinical psychology, counselling psychology, community psychology, social work, and community workers from each other began to blur. I talked with Connie, who quickly showed me her writing, which was powerful and challenging to read. She was about twenty, the oldest of five children, and her mother often needed to go away to work, sometimes for up to two months. Connie became the mother who the others turned to. I asked who she turned to, and she said it was her writing. It was a compulsion, she felt she had to do it, but she also read widely, and had just finished Jane Eyre, which she identified with closely. I saw Connie giving her writing to several people to read, always selfdenigrating, finding it hard to believe that other appreciated it. She often threatened to throw it away.

Then the almost forgotten owner of the big zozo appeared to claim his hut and the other two we gave to a self-help group making bricks. By then we had repeatedly confirmed our reasons for staying, and letting the zozos go brought with it a feeling of being part of a community.

A small contribution was collected for lunch from everybody there, and some went off to buy food, which was then cooked on an open fire. As the morning went on more and more gathered, until at lunchtime there were about fifty including many children who had finished school. Everybody gathered under the shelter for lunch, but before it was served there was more ceremony. People were welcomed by others holding the talking stick - those who had not been for a while, newcomers, two exstudents who had brought along their new baby who was welcomed as part of the Agape family. Mariella was leaving to go on a three-month sailing trip with her new partner. She was awarded a pair of waterwings and a child's plastic windmill as an

appropriate talking stick for the ocean. Some beautiful words were spoken, a small group sang for the occasion, and Mariella sat down with her friends, crying her grief.

Eventually it was time to eat spaghetti, bread and watermelon, all eaten with the hands. My elderly neighbour finished mine for me.

Then, in a misguided effort to clean up the surrounds, a bulldozer levelled the yard, leaving a dust bowl around the bluegum tree. And still we continued, week after week, then to sit in the dust under the tree, shifting with the shade to find shelter from the sun, making places to practice, now in various ways.

After lunch I was invited to hold a group discussion for anyone who wanted to join in. Daunted at the varied group of students who wanted to know about my work, children and township members who I knew could speak little English, it was hard to know where to begin. Questions came in slowly. For some reason I began to speak about the Buddhist Four Noble Truths, about suffering and its causes. Suddenly there was animation in the group – yes, everyone suffered, yes, suffering was caused by wanting things to be different, yes, we needed to let go of that constant wanting. Stories began to be told. One woman could predict the future, and had strong premonitions, but people did not always want to know them. Sometimes, too, she was unable to reach the person concerned before something bad happened to them. Then she felt bad herself.

In this process of sitting under the tree, our ways of doing therapy were also falteringly being transformed. Rituals of conversation and those of

transformation were the words we would then use to describe our practices of healing. There were times when we would be acutely aware of doing nothing more than perpetuating the problems of the people we worked with. Our reluctance and fear would keep us from connecting with their pain and aloneness. And then there were moments when we would find connection and trust in the shaded spaces that would transform into holy temples and sacred sanctuaries for all.

The discussion ebbed, and I found myself sitting with two elders of the

Through confrontation with our senses of self and our own beliefs, we have come to believe that the richness of similarity and difference at play in all human contact necessitates the view that all human interaction is simultaneously crosscultural and not. Thus culture is co-created in each and every conversation.

community, one of whom had been attending since the beginning of the project, when he was an alcoholic. He was now a valued interpreter, an imposing tall man with a limp. He said he had been born political, and we began to talk politics. He pointed out our arms, mine pink, his brown, next to each other in the sunshine. A few years ago, he said, we would both have been arrested for immorality, just for talking with each other. He chuckled and flirted with me. I felt able to ask him something which had concerned me – why, when white people had caused him so much harm, did he not hate us? He told me that he had had white friends who had struggled alongside them, some of whom had been imprisoned themselves or died for the cause. How could he hate all white people? He was called to help interpret for a group of five men.

Later I found out he had been left for dead on the veld, with permanent injuries, hence the limp. He was unfailingly positive about the current situation, and said that people's lives had definitely changed for the better.

We would entreat the therapists to go out to the homes and places of living of those who came. They would follow these trails, discovering hidden 'family' in the places they visited. And so we all came to know of poverty in disconnection, of the wealth of connectedness, and the metaphorical meanings of 'family' and 'home' beyond biology and place.

The other older man and I approached a young man new to the project, and began to speak with him. He passed us a much-read letter from the hospital recommending that he should receive a disability pension after he had been stabbed in the head and was left with mental difficulties which made it impossible for him to work. He was anxious, wanted to be seen, and I began to catch his anxiety, looking for a therapist who could see him. It turned out that he had been seen earlier, and when I got back the two men were deep in conversation, looking calmer and happier.

Then the question re-appeared about having a building or not. The idea had come up before. At those times we had gotten into all sorts of 'stuckness' around issues of funds and ownership, and of being 'inside' and 'outside'. We had no budget. We preferred not to be sponsored as we did not want to be tied to the dictates of the givers, nor did we want to become a welfare organisation with a formal constitution and an executive body removed from the grassroots functioning of the community itself.

We wanted to be visible and also protected from the wind and the rain. So, sometimes we drew in the dust while talking of a structure. From this came a design for a shelter that is based on a spiral. It has low, undulating circling walls, spiralling into an open thatched-roof hut in the centre. The structure allows us to be inside and still remain connected to the flow on the street.

People were beginning to drift away. The students, on a Master's Psychology degree in Pretoria where Stan is Professor, had a viva exam the next morning and were anxious to prepare for it. A small group of us ended up standing together sharing our experience of the day. Connie the writer was still there, but she was feeling hurt by something that had happened, and said she would not be coming back to the project, nor attending the end of year party. She had not had the attention she needed. She was heard and what she said was accepted. Others acknowledged their tiredness, but felt that it had been a good day, quiet by the usual standards but good.

Agape began as an idea that creates place. It opened a talking space for some, and a place to meet or do activities for others. It is a context for the ritual of psychotherapy and the beginning point for projects that spiral out to the schools and into the informal settlements beyond. It is the place that brings forth sounds and songs from the silence of cold wars and from the tyranny of violence. It is the reservoir from which 'family' can arise beyond blood lines or oppression. It is the cauldron of crisis. It is a confluence and an altar. It is a shifting idea that finds life in connection. It is the creation of many and the possession of none.

Further Reading:

Seedat, M. (Ed.) (2001). Community Psychology, theory, method and practice: South African and other perspectives. Cape Town: Oxford.

Stan Lifschitz (Ph D) is a professor of psychology at the University of South Africa in Pretoria, SA where he is also the coordinator of the professional clinical training programme. He has been involved with the training of psychotherapists for almost 30 years. He is the founder and co-convenor of Agape Healing Community. He is also widely travelled and published and is a member of the community of indigenous healers.

Corinne Oosthuizen (Ph D) is a senior trainer of clinical and community psychologists at the Rand Afrikaans University in Johannesburg SA. She practices as a therapist and has been involved in the training of psychotherapists and in the evolution of healing community contexts for 18 years. She has been involved with training in various countries. She has also been a co-convenor of the Agape Healing Community for more than 10 years.

Maxine Linnell is the commissioning editor of Self & Society, a Core Process Psychotherapist, supervisor and trainer, and with Ian Rees co-founder of the Integral Living programme. She recently spent six months in South Africa, teaching and learning. She lives in Leicester, and can be contacted on selfandsoc@aol.com, or 0116 2448668.