



Exploring Cultural Issues for Constellation Work in South Africa

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Constellation work is a therapeutic and counselling intervention recognised in Germany and other European countries since the 1970s. Various scientists and practitioners have contributed to its theoretical and practical development, and research on the subject has increased over the past few years. However culture in constellation work has received little research attention and has not been empirically studied in African contexts. The aim of this article is to reflect on culture and its influence on constellation work in multicultural, post-apartheid South Africa. An empirical qualitative research approach within the phenomenological paradigm was adopted. Six constellation facilitators were interviewed with in-depth and field notes taken during participative observations of constellation workshops. The findings provide insight into culture in constellation work in the South African context. Theoretical and practical recommendations for scientists and therapy practitioners working with systemic interventions like constellation work are provided.

Keywords: constellations, culture, South Africa, post-apartheid, emic perspectives, qualitative research, family therapy

Key Points

- 1 Constellation work (CW) is a therapeutic intervention that integrates aspects of family systems therapy.
- 2 The concept of culture has hardly been addressed in CW research.
- 3 Culture impacts on CW in terms of topics and key issues.
- 4 CW in South Africa can contribute to the improved understanding of members from different cultural groups.
- 5 CW is a cross-cultural approach to achieve healing, well-being and mental health.

Culture is an aspect of diversity that places particular emphasis on the differences between individuals and members of groups belonging to various cultures and races, and between individuals of different genders and ages (Mayer, 2011). It is an important aspect of therapeutic and counselling interventions, shapes individuals' perceptions and interpretations (Ross, 2007), determines a person's goals, and influences the transmission and interpretation of messages (Gudykunst, 2005). Therapists, counsellors and constellation work facilitators (CWFs) can benefit from understanding the cultural influence of experiences and interpretations in counselling and group intervention settings.

Family constellation work is a therapeutic group process that integrates components of family systems therapy (Schweitzer, Bornhäuser, Hunger & Weinhold, 2012; Weber, 2007; Weinhold, Hunger, Bornhäuser & Schweitzer, 2013), existential phenomenology and ancestral beliefs (Cohen, 2006; Mayer & Hausner, 2015). It has become an international interdisciplinary movement, starting with the pioneering work of Bert Hellinger in the 1970s, and has gained the interest of

European psychologists, family therapists and counsellors (Stiefel, Harris & Zollmann, 2002). Constellation work (CW) has been defined from cultural and interdisciplinary perspectives (Levine, 2005; Payne, 2005; Ruppert, 2000; Schusterman, 2003; Van Kampenhout, 2003) and in this article is presented as a therapeutic intervention.

In South Africa researchers have only recently started to consider culture-specific views of counselling, therapy and consultancy (Mpofu, Peltzer & Bojuwoye, 2011). In recent years research into CW has increased in the context of family therapy (e.g., Schweitzer et al., 2012; Weber, 2007; Weinhold et al., 2013). However in the literature there are few empirical or theoretical studies of CW as a specific form of therapeutic intervention (see Mayer, 2014, 2015).

Discourses on Culture

Culture has been defined in many ways, and has been the subject of both scientific and non-scientific discourse (Mayer, 2013). While many responses have been given, its definition nevertheless remains indefinite (Kreuter & McClure, 2004; Mayer, 2006). Culture has been defined as a general, complex system that influences the perceptions, thoughts, feelings and actions of human beings (Bhugra & Becker, 2005). It is a dynamic force in creating assumptions, expectations, values and mental health (Mayer, 2013). Cultural values provide a framework for evaluating what is contextually right or wrong and influence the individual's view of relationships (Mayer & Viviers, 2014a).

Culture is often placed between the two opposing poles of 'homogenic wholeness' and 'dynamic difference' (Treichel, 2011, p. 17). Homogenic wholeness describes cultures as relatively static, homogene in themselves and only as distinguishable from external, 'other' cultures that are outside of the homogenic culture. Others refer to cultures as 'dynamic' and heterogene within themselves (Treichel, 2011, pp. 17–18). However, culture can be understood as a social phenomenon that expresses the specifics of groups and individuals as cultural beings (Mayer, 2013). It provides a kind of social order (Durant, 1981), according to cultural values and norms, or a pattern of meaning and symbols drawn from religion, ideologies, sciences and the arts that serves to orient individuals in society and create meaning in life (Geertz, 1987; Kao, Hsu & Clark, 2004).

From a cultural science perspective Straub (2007) distinguished between the 'essentialist' and 'constructivist' view of culture, defining culture as an antecedent of communication (Otten & Geppert, 2009). In the essentialist definition culture is viewed in terms of differences and contrasts, the cultural self and others (Moosmüller, 2007). Based on Herder's (1994) concept of culture as the foundation of a (national) homogenic state that gains its character from the experience of cultural differences, it is a closed, static and consistent system.

Social constructionist perspectives (e.g., Atwood & Conway, 2004) have been used extensively in family therapy practice and research. Likewise, constructivist definitions of culture are based on the interactionist approach, the assumption being that culture is constructed and socio-culturally defined through communication (Mayer, 2011). Accordingly in constructivist perspectives, reality is seen as subjective, dynamic, interconnected and overlapping (Welsch, 2011). Culture is created through individuals' thoughts, perceptions, world views, emotions and meaning-

making (Eckersley, 2007), which are produced and reproduced through interactions of individuals and collectives. In a social constructionist approach to family therapy research (Atwood & Conway, 2004), it is assumed that different meanings can be applied to cultural situations. Expertise is anchored in individuals and cultural groups where ascribed meaning is subjective and changeable according to differences in time and space.

Therapeutic Interventions and Culture

During the past decade, there has been an increase in research into counselling, therapy, consulting and coaching practices across cultures (Almeida & Durkin, 1999; Atwood & Conway, 2004; Eimmermacher, Lanfranchi & Radice von Wogau, 2004; Von Schlippe, El Hachimi & Jürgens, 2003). The difficulties associated with applying counselling and therapeutic interventions across cultures have been considered (Cogoy, 2001; Österreich, 2001; Radice von Wogau, 2004) and especially in family therapy (Falicov, 2003; Waldegrave, 2009).

Von Schlippe et al. (2003) emphasise the importance of cultural issues in therapeutic sessions. Psychotherapy and psycho-social counselling practices have been described as 'culturally complex practices that demand transcultural competence on the part of both professionals and clients' (Grothe & Straub, 2008, p. 50). Important issues in therapeutic interventions include the client's migration history, cultural and gender aspects, as well as personal development from a cultural perspective (Radice von Wogau, 2004). Eberding (2004) emphasises the influence of mother tongue, body image, expectations of the counselling session, cultural stereotyping, prejudices, language barriers and trust-building across cultures, as well as meaning-making and the influence of culture on the construction of meaning across cultures. The culture-specific understanding of health and sickness, illness, disease, social roles, gender, familial life cycles, cultural traditions and the construction of realities need to be considered (Hegemann, 2004), in order to explore relationship-building (Grothe & Straub, 2008) and build rapport, trust and encourage compliance (Ramirez, 2003).

Therapeutic practices across cultures focus on both general and specific culture-bound issues relating to the cultural context within which an individual lives. According to Steixner (2009), they harness person-centeredness, as well as practical approaches, to focus on developing the capacity to increase 'self-management' (e.g., self-awareness, self-consciousness, trust and stress resilience), 'difference management' (e.g., openness, interest and tolerance) and 'integration management' (e.g., flexibility, ambiguity tolerance and complexity reduction).

Culture in Therapeutic Interventions in South Africa

In the South African population, 79.8% are black, 9.0% coloured, 2.5% Asian/Indian and 8.7% white (Statistics South Africa, 2013).¹ Females account for 51% of the population and males 49%, belonging to approximately 30 different cultural groups involving 11 official languages, and eight religions with 25 denominations.

Within post-apartheid restructuring processes, culture-sensitive healing is important for both individuals and cultural collectives, and has been a challenge for psychotherapists and counsellors (Eagle, 2004). Traditional African healing systems exist in

parallel with Western healing approaches (Van Dyk, 2000). The integration of these concepts has been promoted (Moodley & West, 2005), and interest in indigenous African healing systems has been established (Madu, 2003; Mpofu et al., 2011). Eagle (2004) states the negative impact of African belief systems on healing processes following trauma and highlights the importance of developing integrated healing interventions (Swartz & Drennan, 2000).

Constellation work is seen as an intervention that integrates (shamanic) healing rituals in Native American (Mason Boring, 2004) and in Nordic contexts (Van Kampenhout, 2008). However, hardly any research has been conducted on CW within African contexts and its possible integrative approach. It might be seen as a culturally responsive intervention, based on African indigenous concepts of the interconnectedness of phenomenal worlds, spirituality, a holistic (systemic) worldview, the practising of healing rituals and ceremonies and work with ancestral spirits (Bojuwoye, 2005).

Constellation Work: Cultural Issues

Cohen (2004, p. 23) describes a typical format of CW as a group process in which one participant is selected as a client who works on a personal issue, while the others serve as representatives or observers of the entire process. Usually, the members of the group do not know each other and just meet for the CW session. The client first talks with the CWF about the issue that he/she would like to resolve. The CWF explores the background of the client with regard to special events within the family, such as a sudden death, murder, abortion, suicides, war experiences or denied family members (i.e., a missing child that was abandoned). The representatives are chosen to represent members of the family system, or structural elements, such as an illness, a feeling or another certain phenomenon. The client gives the representatives a certain place where they are able to access the feelings and relationships of the family in question (Ulsamer, 2005) and access the unconscious architecture of automatic thought and behaviour patterns (Schneider, 2007). The representatives express their feelings and move into different positions. The healing resolution is often introduced by a so called healing movement, healing sentences or the inclusion of family members who were excluded (Mayer & Hausner, 2015). Finally, the problem is 'released' from the unconscious mind and the client can go on working with the new information from the CW process, for example, during a following family therapy session.

Constellation work can be used as one specific intervention within family therapy providing a new view of a situation and the (family) system. At the same time it uses the inner image of the family externalising it through a group process. CW is founded on basic theoretical principles (Cohen, 2006), which include assumptions of equal and unequivocal right to belong to the family, the unconscious group conscience influences guilt and innocence to protect the survival of the group and the giving of parents and receiving of the children (Hellinger, Weber & Beaumont, 1998; Mayer & Viviers, 2014b). Many cultures use rituals for healing and cleansing purposes (Carnabucci & Anderson, 2012) as systemic intervention, which includes dealing with the individual and family consciousness, the presence of the dead, the healing of suffering on behalf of others, as well as the experience of timelessness and intergenerational connections (Van Kampenhout, 2003), belonging, balance and hierarchy (Cohen, 2006).

Hausner (2008) identifies sickness, disease, illness, and health as typical CW topics. Others (Ruppert, 2000; Weber, 1994) focus on symptoms, psychiatric disorders, disability, infertility victimisation, perpetration of war crimes, fostering, adoption and couple problems. Carnabucci and Anderson (2012) discuss perpetrators, justice, trauma and healing as topics in CW whilst Stiefel et al. (2002) use it in organisational settings and Birkenkrahe (2008) for business-related solutions. For South Africa, Payne (2005) highlights that CW is an intervention to deal with the individual, the family and the ethnic conscience of apartheid, by focusing on relationships of victims and perpetrators, government and regimes, war, sexual abuse and crime.

Objectives of the Present Study

Although there is recent empirical research in CW, hardly any theoretical or empirical work linking culture and CW exists. The purpose of this article is to present qualitative research findings on CW and culture from emic perspectives in the South African context and to offer insight into the views of CWFs. Information about culture and typical issues in CW in group workshops in South Africa are presented.

The main research question addressed is: *What are 'typical' topics in CW with regard to members of cultural groups attending constellation workshops?*

Research Methodology

Research paradigm and approach

The qualitative research design is based on the phenomenological paradigm (Collis & Hussey, 2003), which holds that multiple meanings of lived experience for different individuals exist (Creswell, 1998). The phenomenological paradigm includes the epistemological tradition of constructivism and interpretive hermeneutics (McManus Holroyd, 2007), which reflects the complexity and layered multiple realities of both the researcher and the researched (Becvar & Becvar, 2003) and is created through social interaction (Berger & Luckmann, 2000). This research is described as relativist, transactional and subjectivist (Guba & Lincoln, 1998), aiming at understanding the emic perspectives of CWFs by uncovering contextual variables based in the experiences of the researched (Alimo-Metcalf & Alban-Metcalf, 2001). This article contributes to qualitative research in family therapy over the past 15 years (Rhodes, 2012) using a constructivist and social constructionist perspective (Atwood & Conway, 2004).

Research Setting and Methods

The first CWFs in South Africa were trained and graduated in 2006. First-generation CWFs were contacted through a snowball sampling process and invited to participate in the study. Six first-generation CWFs agreed to participate and this sample is expected to contribute rich information (Payne, 2007). The criteria for selection included being one of the first-generation constellation facilitators to be trained and graduated in 2006; and being actively working in the field of CW. All six CWFs were females of different cultural origins. Five of the interviewed CWFs are white and one facilitator is African, as defined in the Employment Equity Act (Department of Labour, 1998). One of the CWFs is German speaking; three are English-speaking, one Afrikaans and one Zulu. All of them have actively practised CW in South Africa since 2006.

Data collection, analysis and reporting

Data was collected through in-depth interviews with six CWFs. Eight constellation workshops were attended based on openness of attendance, availability of the research, location and their being presented by one of the trained CWFs. Participative observation was used and field notes made during constellation workshops (2011–2013). Triangulation of data, theory and methods was applied, referring to the use of different theories (e.g., family therapy, CW, cultural science literature) and research methods (e.g., ways to collect data through interviews and observations).

Data was analysed using the five-step process of content analysis (Terre Blanche, Durrheim & Painter, 2006): Familiarisation and immersion; Inducing themes; Coding; Elaboration; and Interpretation and checking to ensure data quality. Firstly, the researchers familiarised themselves with the data. Secondly it was clustered into themes, for example, culture. After having predefined the themes, data were coded with key words, which led to a fine-tuned analysis of data in the context of key words and codes. Themes and codes were counter-checked, elaborated and interpreted.

The data are reported in a qualitative reporting style. It was reconstructed through intra-validation processes (the researchers analysed and interpreted the data at different points in time and from different perspectives) and inter-individual validation processes (information was validated across researchers) (Yin, 2009). The reconstructed data were presented according to a qualitative reporting style referring to the research question stated above.

Quality criteria and ethical considerations

Qualitative quality criteria were applied referring to worthy topic, rich rigour, sincerity, credibility, resonance, significant contribution, ethics and meaningful coherence as eight key markers of qualitative research (Tracy, 2010).

The study conformed to ethical guidelines, which included 'informed consent, protection of participants, confidentiality, anonymity and accountability' (Tindall, 2006, p. 153). Further ethical considerations included the respect afforded to and the rights of the interviewee and transparency (Powell, Fitzgerald, Taylor & Graham, 2012).

Results of Study

All six CWFs responded to the main research question, relating to typical and culture-specific topics in CW in South Africa.

Overview on issues and cultural groups

The responses (17 topics) appeared to be fairly universal, but also culture specific. The concept of culture was not defined or explained to the interviewees, as the intention of the study was to gain information on how the interviewees defined culture.

Constellation work facilitators identified culture-specific issues in CW as raised by various cultural groups:

- issues arising in the black community (14 topics)
- in organisational contexts (12 topics)

- in the Afrikaner community (four topics)
- among Afrikaans- and English-speaking white people (four topics)
- among coloured people and people of mixed origin (four topics)
- and in poor communities (four topics).

Further issues arose among individuals of European origin in South Africa (three topics) and among members of three identified religious groups (three topics). Two topics raised by people of Malay origin and Namibians, South African Indians and Jews were identified. CWFs identified one topic each as being raised by women, German people and Irish people respectively.

The role of culture in CW

Two out of six CWFs (I1, I5)² referred to culture and CW in general terms. I5 expressed her view on culture and its role in CW as follows:

In my experience there are specific themes for members of different cultures, but the basic principles seem to be the same. There might be some difference in how one talks about mothers/brothers/fathers (these include aunts/uncles, cousins, etc.) in African culture. It is more about awareness of the use of language than change in constellations, or the principles.

I5 identified universal and culture-specific principles occurring in CW. Language in CW is of major importance, as is the way it is used in relation to family members. I5 referred to the way language is used, which varies according to the cultural background. I1 explained why she favoured a client-centred approach in CW:

Because there are such diverse cultures and religions in South Africa, and also represented in constellations workshops. I try to not explain this phenomenon of constellations too much to the participants, but rather ask them to fit it into a frame of reference that makes sense to them . . .

I1 accommodated members of different cultural groups and adopted both a client-centred and a culturally competent approach to facilitation, ensuring that CW resonates with clients' ideas and belief systems. CW is a frame for a shared human experience (I1) which connects individuals across cultures as human beings. This culture-specific and sensitive approach gave rise to specific observations relating to members of black South African communities:

I have found in black South African communities I do not need to explain, I just explain how it works and that the representatives can trust that all the information is useful. It is accepted in these communities that we are connected and that we can perceive what lives in others – it is a given.

(I1)

I1 experienced members of black communities as being accepting of what happened in CW. She considered the belief held in black communities that human beings are connected and that individuals are able to perceive what lives in others to be a culture-specific aspect.

General themes in CW in South Africa

The CWFs considered general themes that occur in CW as being related to a 'racial mindset'; these included internalised racism, racial topics, ethnicity, supremacy, an

apartheid mentality and exclusion of certain family members. They identified race as a topic that played a role in family relations, segregation, belonging and exclusion:

The context of constellation work in SA goes deep to the trans-generational history that needs to be reconciled. The embrace of ancestors highlights the constellation work roots from African indigenous cultures. The constellation work has a way of allowing the remnants of multi levels of trauma this country holds, as a legitimate experience to honour and bow to, all that goes to deepen relational connections and disconnections based on understanding the history of South Africa with the strides that have been taken already by this healing modality.

(I2 emphasised)

From the perspective of I2, cross-cultural reconciliation within South Africa is necessary in order for the healing of the transgenerational wounds of the past. CW can help to heal past multi-layer traumas and can be a tool to embrace the roots of African indigenous cultures and acknowledge their worth. The value of CW lies in increasing deep relational connections among human beings and as an instrument for healing transgenerational trauma.

Further issues mentioned by four facilitators were illness (specifically depression, HIV/AIDS and cancer) and its impact on the family, migrant labour dynamics (including the abuse of migrant workers in South Africa) and difficulties within families and/or with children in families (e.g., sibling rivalry, extended family rivalry, absent fathers, lost or separated parents and 'bad talk' about family members). Three facilitators referred to topics such as unresolved grief, apartheid and the apartheid mindset as being current issues in contemporary South Africa [included were victims and perpetrators of apartheid, betrayal of one's own people, transgenerational and multiple trauma, and the Anglo-Boer war (1899–1902)].

Two facilitators reported issues of 'interrupted reaching out amongst family members' and 'differences in the use of language' across cultural groups within families. One facilitator highlighted systemic entanglements in families including issues of loyalty, resonating patterns of couples, blended family systems, honouring previous partnerships that are ignored or made invisible and new understanding of family relationships and tension. As well as relationship conflict, cross-cultural tensions, the impact of the church, adoption and inter-familial relations in stepfamilies.

Black Africans

According to the CWF workers black people refer to issues of land and/or farm ownership and dislocations, which are closely related to displacement and dispossession (three interviewees). Ancestors, tribal issues, xenophobia, kinship, family feuds and refugees to Africa were frequently mentioned for black participants (each of these was mentioned by two interviewees). One interviewee mentioned shamanic CW with indigenous African cultures, children who were brought up by family members, the impact of time spent in exile, famine, the conflict between traditional belief and Christianity, and the lack of acknowledged identity across colour lines.

The findings indicated that for black people attending CW workshops, political issues (e.g., ownership, exile, identity, xenophobia) were important, as were traditional issues (ancestors, traditional belief). Family issues (kinship, tribal issues, family feuds etc.), survival issues (famine) and racial aspects (identity across colour lines) were also highlighted.

Organisational contexts

Three interviewees emphasised that organisational constellations are typical in South African environments. CW is a well accepted method in business-related contexts (I3). However, only one of the interviewees worked predominantly in organisational consultancy contexts, and referred to various subthemes that occur in organisational CW.

Afrikaner and English-speaking whites

One interviewee talked about her experiences with members of the Afrikaner culture in CW. Topics raised arose mainly from the historical context and included the dominant role of Afrikaners in the nation-building process, being labelled as aggressors and perpetrators, collective and individual guilt experienced with regard to apartheid, the disgrace and humiliation emanating from history and present-day demotion and devaluation. One interviewee identified reconciliation and the creation of a new Afrikaner identity in post-apartheid. This interviewee interacted mainly with the Afrikaner youth, who carry the burden of apartheid.

Topics raised by Afrikaans- and English-speaking whites included the history of the Anglo-Boer War, in particular the transgenerational legacy and the consequences for both the British and the Boers. The imprisonment of women, children and deaths in concentration camps played a role in family constellations. Black farm labourers and soldiers fighting in the Anglo-Boer War were topics raised in CW with regard to suffering of individuals and their incarceration in concentration camps.

Coloureds

Coloured people and individuals of mixed origin appeared to focus on identity, identity construction and confusion in CW. Owing to the history of South Africa, the inclusion of all components of identity and the lack of not being acknowledged in the past, were of particular importance to people of mixed origin. Individuals in this group appeared to struggle with topics of slavery, non-acknowledgement within their family relationships, dispossession and forced removals. These individuals used CW for identity clarification and dealing with non-acknowledgement and the collective history of slavery and dispossession within their cultural group.

Indians

With regard to South African Indians, facilitators identified topics such as slavery and emigration in response to false promises (I5, I6), dispossession (I5, I6) and enmeshment in family systems (I5). According to I5, the first immigrants from India were promised land ownership, which turned out to be false. These Indians became slaves or indentured labourers. They only later established themselves within South African society, predominantly as traders.

Jews

Jewish people, who attended CW, focused on topics such as arranged marriages (I1), immigration to South Africa, leaving family members behind (I5) and experiences of the holocaust (I5).

Europeans

According to I5, Irish people dealt with family experiences of famine, leaving the home country, abortion and the power of the Catholic church, which had an impact on the lives of individuals in Ireland before they came to South Africa. The holocaust was also identified as playing a significant role in the lives of these individuals and families. For German people, World War II played a significant role in constellation workshops (I5).

Three constellation facilitators (I1, I5, I6) made the observation that across different groups of Europeans, the impact of the two World Wars, the holocaust and relocation to sub-Saharan Africa to improve their life circumstances were important areas in which reconciliation and healing were required. From a transcultural and transgenerational perspective, similar issues were raised by both those who settled in South Africa several decades ago and those who settled in the country more recently.

Cape Malay

In CW with members of the Cape Malay community, the issues of displacement and slavery were noted (I1, I6).

Namibians

In CW with Namibians, I6 encountered issues relating to the death of family members and non-family members in concentration camps. This experience was also related to experiences of the family collective or Herero and Nama genocide at the hands of the Germans between 1904 and 1908.

Religion

Religion as practised by different religious groups constituted an important theme, with religion and religious/spiritual tension in contemporary South Africa. With regard to the topic of spirituality as a conflictual issue, the topic of the soul was mentioned, as an important aspect of identity formation and healing processes in human beings (I6) and as an important issue in CW.

In the case of Muslims, areas in which reconciliation and healing were required were Muslim law and its impact on women, and the struggle of young Muslims attending non-Muslim schools to be accepted by, and respected in, the Muslim community. The interviews revealed CW attendance by Muslims who were not accepted by their family or the Muslim community owing to their beliefs and their attendance of non-Muslim schools.

Gender

With regard to gender, interviews with facilitators revealed that women often have to deal with gender reconciliation and the effects of patriarchy (I2). One CWF encountered gender issues in her constellations, with women having to manage relationships within a patriarchal community and deal with consequences of gender roles and gender expectations.

Poverty

Topics that arose in CW in poor communities included poverty and its consequences, which have an impact on families and relationships (I2, I3, I5) and abuse such as rape, sexual abuse, drug and/or alcohol abuse and violence.

Summary of findings

Constellation work facilitators identified both typical and culture-specific topics. Culture-specific issues related to culturally, ethnically and racially defined groups (black people, coloured people and white people) as well as to language groups (Afrikaans- and English-speaking people), groups of national belonging (Namibians, Irish people, German people) and continental belonging (European). Typical topics and group membership were also defined with regard to gender (women), religious belonging (Christian, Muslim, Jewish), socio-economic status (poor communities) and organisational contexts (organisations).

Often, topics that seem to be contentious in family contexts are directly related to the collective history of the country (such as apartheid in South Africa, World War II in Germany/Europe, and the genocide in Namibia) or colonial world history (the enslavement of Indians/Malays who were sent to South Africa). These issues are linked to individual and/or collective social values and related norms or behaviours of groups (family, culture or religious groups), such as arranged marriages, Muslim law or experienced guilt of Afrikaners.

Discussion

Based on the above findings it is apparent that CW in South Africa makes a unique contribution to integrating individuals from various cultural backgrounds and working on individual as well as socio-cultural and historical topics. Culture is an element of diversity (Mayer, 2011). In terms of general CW, culture is defined in terms of race, national belonging, language group membership, gender, religion and socio-economic standing.

For CWFs, the concept of culture is closely comparable with the concept of diversity. Facilitators were acutely aware of the cultural impact of individuals and groups in CW (Gudykunst, 2005). Generally, CWFs considered CW to be a universal method or intervention, but aspects such as culture-specific language use, interactions, taboos or healing principles and belief systems were nevertheless acknowledged as exerting an influence (e.g., Payne, 2005; Van Kampenhout, 2003).

Constellation work facilitators drew on both essentialist and constructivist concepts of culture (Straub, 2007). The question of the nature of culture thus remains unresolved in this context, as it is in the literature (Kreuter & McClure, 2004; Mayer, 2006). On the one hand, CWFs considered group members to belong to a holistic, monocultural group (Herder, 1994), such as 'the black community', or 'the Afrikaans-speaking white community', also referred to as 'the Afrikaners'. On the other hand, they were acutely aware of the various topics raised within the various cultural groups, and therefore viewed the heterogeneity within the defined group as 'dynamic differences' (Treichel, 2011) that are created through interaction (Mayer, 2011). CWFs were aware of the complexity inherent in various cultures (Bhugra & Becker, 2005) and the complexity arising from the multicultural nature of South African society. They identified overlapping themes across cultures in terms of an interactionist approach to culture (Mayer, 2011) that deals with overlapping themes, interconnectedness and cultural dynamics (Welsch, 2011).

Regarding counselling, therapy and interventions across cultures, CWFs were aware of the impact of apartheid, the racialised concepts of culture (Mayer, 2004), and the theme of cultural identity changes (Booyesen, 2007), which become apparent

in CW (Thomas, 2004). CWFs were conscious of culture-specific belief systems (Eagle, 2004) and their own cross-cultural competences (Hickson & Christie, 1989). They recognised a connection between CW and cross-cultural expectations and belief and healing systems (Van Dyk, 2000), and therefore promoted a cross-cultural CW approach: combining family therapeutic and traditional healing approaches (Moodley & West, 2005).

The findings showed that CWFs identified 'the soul' as an important theme (Cohen, 2006; Van Kampenhout, 2003), and that conscience, belonging, balance and hierarchy, and existence were concepts that simultaneously influenced and derived from the principles of CW (Cohen, 2006). Illness, symptoms, victimhood and perpetratorhood, fostering, adoption and couple problems (Hausner, 2008; Ruppert, 2000; Weber, 1994) also numbered among the important themes in South African CW. Issues relating to perpetrators, trauma and healing (Carnabucci & Anderson, 2012) were further significant topics. CW is acknowledged in organisational contexts and emphasised in international CW literature (Birkenkrahe, 2008; Stiefel et al., 2002).

The study also confirmed that apartheid, race, racialised identities, relationships between perpetrator and victim, and sexual abuse and violence/crime (Payne, 2005) are important themes across cultural groups in CW. Culture and the cultural context (Dykstra, 2004) are viewed as influencing healing and constellations. For Germans in South Africa, the holocaust, World War II and pogroms are important areas in which healing is needed (Dykstra, 2004). As highlighted by the facilitators, language may have a significant impact on healing processes and provide insight into family relationships (Dykstra, 2004).

Constellation work facilitators emphasised the contribution of CW to collective healing, and that the time is right to work on issues such as apartheid and the Anglo-Boer War (Payne, 2005). South African facilitators acknowledged that CW integrates Western and African healing approaches as an instrument for cross-cultural counselling and therapy (e.g., Eimmermacher et al., 2004), since the CWF can refer to the client's migration history, cultural and gender aspects, as well as personal development from a cultural perspective (Radice von Wogau, 2004). In therapy and counselling, cognisance needs to be taken of all aspects of cross-cultural communication (Eberding, 2004), such as mother tongue, body image, expectations of the counselling session, cultural stereotyping, the application of prejudices, language barriers and trust-building across cultures, as well as meaning-making and the cultural impact on the construction of meaning. As highlighted in the literature (Steixner, 2009), therapy should focus on general as well as culture-specific issues within the specific cultural context.

With regard to family therapy, CW can provide deeper insights into systemic perspectives of systems, meaning-making of the client and his/her subjective cultural perspectives. It can be used as an intervention in family therapy when the client and the therapist need new (non-verbal) perspectives into the contextual situation of the client. CW then supports a practically applied constructionist perspective on the client's (family) system (Almeida & Durkin, 1999; Atwood & Conway, 2004).

The discourse on therapy, counselling and consultancy aims at combining traditional healing and psychotherapeutic approaches (Moodley & West, 2005). The majority of CWFs viewed this as an opportunity to reconcile Western and traditional African approaches to healing and therapeutic intervention. CW could become a cross-cultural technique to achieve healing, well-being and mental health (Carnabucci & Anderson, 2012).

South African CWFs are in a position to contribute context-specific knowledge of African and Western healing processes (Mason Boring, 2004; Van Kampenhout, 2003), play a role in the integration of indigenous healing systems (Madu, 2003; Mpofu et al., 2011), and focus on indigenous healing approaches (Bojuwoye, 2005).

Conclusion and Recommendations

The purpose of this article was to present qualitative research findings on CW and culture in the South African context. The study was limited to primary and secondary data analyses and based on a small number of interviewees. It provided in-depth information that is not generalisable and as a first empirical study on the topic could serve as an orientation for follow-up studies in this field in various cultural contexts. The findings reveal that both essentialist and constructivist approaches are vivid in CWF for defining culture and categorising members of different cultural groups.

Culture, broadly defined as diversity, impacts on the therapeutic CW process. CWFs are aware of cultural issues and cross-cultural challenges in CW. CW is viewed as a cross-cultural therapeutic intervention method – and it has not been defined as such before – particularly to improve the practical integration of Western and African belief systems. Here CW offers potential to integrate different cultural approaches to therapeutic work and healing. It offers an important intervention to address and bridge cultural gaps in therapeutic work and in family therapy, since it overcomes language barriers and intercultural communication challenges by applying non-verbal techniques within a therapeutic context, which provides space for meaning-making and the creation of new perspectives and solutions.

Future research could explore the links between family therapy and CW approaches across cultures. Further on, it could focus on CW and its culture-specific adaptability, as well as cross-cultural fit with members of different socio-cultural groups in international comparisons. Attention could be given to the extent to which cultural belief systems and meaning-making in CW processes within family therapy settings are effectively taken into account from the client's perspective. Research is also needed to evaluate if and how cross-cultural challenges in therapies are overcome through interventions such as CW.

As an applied intervention method in family therapy, CW is particularly suitable for culturally sensitive work. It might open a door for the healing of trans-generational trauma and legacies, as well as in indigenous approaches to healing and therapy.

In subsequent CW research, CWFs could explore cultural thought styles, behaviour, emotions and cultural origin and the impact of culture during the process. It would be helpful if CWFs were to run workshops on cross-cultural healing and transformation in post-apartheid South Africa and in other countries. Here collective healing processes could contribute to reconciliation with the pasts of individuals and collectives, minorities and majorities.

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EndNotes

- ¹ According to the Employment Equity Act (Department of Labour, 1998), four race groups are defined in post-apartheid South Africa: White (European decent), Coloured (mixed race), Indian (Indian origin) and African (previously described as Black). During apartheid, people of African origins were defined as Black. In contemporary South Africa the term Black is often used as a political umbrella category to include African, Indian and Coloured. However, in daily interaction and even in research, the previous racial categorisations are still used in South African contexts. In the study cited, the previous categorisations were used. In this study at hand, the authors use the racial/cultural categories used by the interviewees themselves. This use of language is an accepted and respectful way for describing cultural identity in the South African context.
- ² The interviewees are referred to as I. 15, for example, is interviewee 5.

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