

Sailing Beyond Adversity

Participatory Action Research into The Little Optimist's Sailing Therapy for Empowering Marginalized Youth in Cape Town

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Abstract

This research paper investigates the effectiveness of The Little Optimist's (NGO) sailing therapy in providing marginalized children in Cape Town with the necessary psycho-social mechanisms to navigate the challenges (gangsterism, gender specific challenges, lack of opportunities, lack of motivation and inspiration, and cycles of violence) they face. For this aim, the study employs a Participatory Action Research (PAR) methodology, drawing on unstructured interviews, observations, and secondary data analysis. The employment of multiple epistemologies, namely, the Western perspective and Indigenous perspective, allows for context sensitive nuance within the research. The research unfolds through an analysis divided into four parts: the identification of challenges, the identification of psycho-social mechanisms, Indigenous knowledge perspective, and the evaluation of The Little Optimist's efficacy. Recommendations are provided for expanding the program's duration, securing adequate funding, and empowering role models and caretakers to sustain its impact. The findings of this research paper suggest that The Little Optimist's program plays a significant role in equipping marginalized children with essential psycho-social mechanisms, offering resilience, optimism, and self-confidence in the face of adversity.

Key words: blue therapy, marginalized youth, South Africa, Cape Town, psychological-social mechanisms, non-profit organizations

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I. Introduction

For many people, the day-to-day life in South Africa is characterized by a complex system of challenges due to the legacy of the apartheid-era and colonialism. Injuries resulting from interpersonal violence significantly contribute to the turmoil that reigns in the country (Pillay-van Wyk et al., 2016). Homicide rates, considered the most reliable indicator of interpersonal violence (Matzopoulos et al., 2015a), are globally among the highest, with South African cities exhibiting rates 40% higher than other regions in Africa (Matzopoulos et al., 2015b). Among major cities, Cape Town records the highest homicide rates (Matzopoulos et al., 2014). Various factors, spanning biological, behavioural, societal, and structural risks, drive violence within the city, with upstream factors predominantly influencing the issue, necessitating a comprehensive intersectoral prevention approach (Matzopoulos et al., 2010). Homicide rates align with the geography of inequality, concentrating in impoverished neighbourhoods (Groenewald et al., 2010). The legacy of apartheid spatial planning is evident in the development of urban slums, a consequence of forced removals that displaced Black and Coloured residents to distant ‘townships’¹ or ‘Cape Flats’ on the urban periphery, disrupting social organization (Matzopoulos et al., 2010).

The involvement in crime and susceptibility to peer influence are strongly associated with youth (Baron, 2003). South African youths grapple daily with challenges such as poverty, unemployment, shack living, poor health, gangsterism, substance abuse, and racism (Lindegard, 2018). Violence caused by crime poses an extraordinary risk to South African men, being the leading cause of death among males (Donson, 2008). In the age group of 15–

¹ We are aware that there has been some debate about the use of the term ‘township’ due to negative stigma, with some using ‘locations’ as an alternative. However, we could not detect this term much in academic literature, and it was used only by few participants in our fieldwork. Therefore, we chose to stick with the term ‘township’ for the sake of familiarity to the reader, hoping to make it as accessible as possible to a wider audience.

29, young men face the highest homicide victimization rate in the country (184 per 100,000), and this age group is significantly overrepresented in homicide suspect statistics (CSV, 2008). Township areas experience victimization rates among young men more than twice the average in other regions. The evidence of these problems exhibits the need for organizations that tackle these situations, aiming to empower marginalized youth in South Africa.

The Little Optimist is a non-profit organization that aims to target such at-risk youth through their sailing therapy programs (The Little Optimist Sailing Academy, n.d.). On their 1-day-programs, they give children from marginalized communities the opportunity to step outside of their environment. During the program, they undergo sailing therapy. After learning about water safety and ocean health, the children can sail their own boat (an optimist) for multiple hours. In addition to this program, The Little Optimist also takes the children to the Two Oceans Aquarium to further connect with ocean life. Their aim with these activities, is to foster a sense of optimism, resilience, and agency among the children and youth that face 'cycles of violence.' One of the pillars they base their program on is that of blue space therapy, which is the idea that the exposure to natural water resources leads to improved mental health outcomes. These should help at-risk youth in dealing with, and refraining from entering, violent cycles, and rather be inspired to think optimistically of what they might achieve in their lives. Furthermore, the sailing instructors leading their programs are from similar marginalized areas (specifically, the Cape Flats) themselves. Hereby, they hope to relate more to the children, as they come from similar backgrounds, speak the same language, and have similar customs. These instructors went through similar sailing programs themselves and are now advancing their careers as professional sailors, by which they also serve as role models for the children visiting their sailing therapy. Overall, The Little Optimist takes the following UN sustainable development goals as their objectives: Good health and well-being; Quality education; Gender equality; Decent work and economic

growth; Reduced inequalities; Life below water (United Nations Development Programme, 2024).

In recent years, the therapeutic potential of blue space interventions has attracted attention in academic literature. The systematic review by Britton and colleagues (2018) proved that blue space interventions have a direct impact on health, particularly mental health, and psycho-social well-being. Indicators of such included self-esteem, self-efficacy, social confidence, resilience, enhanced social relationships and pro-social behaviour. The researchers reviewed five specific studies on sailing, which unanimously underscored that indicators of mental health and psycho-social well-being increase as a result of sailing therapy (Grocott and Hunter, 2009; Hayhurst et al., 2015; Ritchie et al., 2014; Capurso and Borsci, 2013; White et al, 2017).

However, notable gaps exist in the conduction of research on blue space interventions in a developing African context, which aligns with the broad underrepresentation of African nations in academia, particularly in mental health research (North et al., 2020). It is therefore of significant importance to assess interventions like those of *The Little Optimist* in their influence on youth's coping strategies in navigating the challenges they face in their respective contexts. Research conducted in Western countries might not be generalizable to different, specifically South African, contexts. In this light, the research question this paper will address is: 'In what way does *The Little Optimist's* sailing therapy provide marginalized children in Cape Town with the necessary psycho-social mechanisms to navigate the challenges they face?'

To investigate this question, the research paper adopts a Participatory Action Research (PAR) methodology, drawing inspiration from Paulo Freire's *Pedagogy of the Oppressed* (1968/2017). Emphasizing *conscientização*, praxis, and dialogue as foundational pillars, PAR promotes a collaborative approach where researchers and the community unite

as co-investigators, aiming to counter the adverse impacts of traditional research methods. The methodology unfolds through a triadic process of data collection, reflection, and action, fostering participatory empowerment. Data collection involves unstructured interviews and observations, establishing trust-based relationships with participants. Reflection, integral to PAR, occurs post-interviews or observations, guiding ongoing dialogue and ensuring participant perspectives remain central. The research comprises five phases, encompassing collaborative problem identification, exploration of psychological-social mechanisms, an Indigenous perspective, and analysis of The Little Optimist's efficacy. The latter synthesizes observations, reflections, and experiences to comprehensively understand The Little Optimist program's impact. Findings lead to co-created recommendations with the program team, promoting a collaborative ethos for positive change within its contextual implementation.

Positionality

With regard to our chosen Participatory Action Research methodology, it is important to ensure transparency regarding to what extent the identities of the researchers relate to the topic of research, and to the participants' identities, as well as the researchers' portrayal of the participants (Roberts et al., 2020, p. 11). Therefore, we want to reflect on our own positionality within this research to ensure transparency on how our worldviews might influence our interpretation of participants' statements. With this in mind, we want to address that the three authors of this paper are white, educated, and Dutch women, who have not experienced marginalization or racial discrimination. Instead, our positionality can best be described by the existing concept of "W.E.I.R.D.": Western, Educated, Industrialized, Rich, and Democratic (Muthukrishna et al., 2020). In addition, all three authors position themselves as progressive liberals on the political spectrum, and do not conform to any traditional religion. Instead, two of the authors describe themselves as spiritual, whereas one author

describes herself as agnostic. Lastly, the way we perceive reality corresponds the most with constructivism and critical theory.

II. Literature Review

In recent years, the therapeutic potential of blue space interventions, specifically designed to address the needs of individuals with defined (mental) health challenges, has garnered attention in the literature. The systematic review conducted by Britton et al. (2020) sheds light on the diverse applications of blue care, emphasizing its direct impact on health, particularly mental health, and psycho-social well-being. Blue space, as defined in the paper, encompasses all visible, outdoor, natural surface waters, aligning with the broader concept of nature-based solutions (NBS) endorsed by the European Commission. The specific focus on nature-based therapy, termed blue care, involves pre-designed activities in natural water settings, targeting individuals for managing illness and promoting health and well-being (2020, p. 51). Due to the rarity of literature on the topic of sailing therapy within the theoretical branch of blue care, this paper discusses literature and research conducted on different areas of blue therapy, also including surf therapy.

In short-term assessment, the existing body of literature overwhelmingly indicates positive outcomes of blue care on mental health and psycho-social well-being. For instance, the studies, as discussed by Britton et al. (2020) revealed positive impacts on self-esteem, self-efficacy, social confidence, and resilience, alongside environmental connectedness, which exhibited less definitive improvement (Britton et al., 2020, p. 60). In addition, the study by Hayhurst et al. (2015) on enhancing resilience in youth through a 10-day developmental sailing voyage found a substantial increase in resilience within their participants, defined as the ability to react adaptively to adversity, emerging as a crucial factor in youth development. Key elements contributing to resilience include competence, sense of belonging, community involvement, and active control over environments (Hayhurst et al., 2015, p. 41). Resilience-focused interventions should be designed to promote positive

chain reactions, reduce risks, and enhance individual competencies, such as self-efficacy and the ability to seek social support when needed. The pathway to resilience, as suggested by Rutter (1987), involves successful engagement with risk rather than avoidance, emphasizing the importance of both adversity and protective factors in the process (Hayhurst et al., 2015, p. 41).

Moreover, the pilot randomized control trial (RCT) detailed in the study by Olive et al., (2023) aimed to assess the feasibility and acceptability of a surf therapy program designed to ameliorate symptoms of mental ill-health in children and adolescents. The trial, conducted in Australia, compared a 6-week mentor-supported surf therapy program with a wait-list control group among participants aged 8 to 18 years seeking help for mental health issues. Results indicated reductions in symptoms of depression, anxiety, emotional problems, peer problems, hyperactivity/inattention, and overall difficulties among participants receiving the intervention. Similar results were found by a study conducted by McKenzie et al. (2021), which focused on evaluating the impact of the Waves of Wellness (WOW) Foundation's 8-week surf therapy program on mental health outcomes in Australian at-risk youth. Findings revealed significant improvements in resilience, self-esteem, social connectedness, and depressive symptoms post-intervention. Participants expressed unanimous agreement that the program normalized their experiences with mental health and facilitated personal growth through mastery experiences and the development of supportive relationships.

In conclusion, in short-term assessment, the collective findings from various studies underscore the significant positive impact of blue care or therapy on mental health and psycho-social well-being. Studies such as those by Britton et al. (2020) and Hayhurst et al. (2015) consistently demonstrate improvements in self-esteem, self-efficacy, social confidence, and resilience among participants engaging in blue care interventions. The pilot randomized control trial conducted by Olive et al. (2023) and the study by McKenzie et al.

(2021) further corroborate these findings, showing significant reductions in symptoms of mental ill-health and improvements in resilience, self-esteem, social connectedness, and depressive symptoms among participants in surf therapy programs. However, there is a notable lack of research exploring the long-term effects of blue therapy interventions. In addition, the existing assessments of the longevity and persistence of these positive outcomes indicate that, in the long-run, mental-health and psycho-social well-being improvements are not sustained.

For example, Capurso and Borsci (2013) observed a reversion of self-concept after three months, raising questions about the sustainability of intervention effects. In addition, for both the studies conducted by Olive et al., (2023), and McKenzie et al. (2021), on the Australian youths, the improvements were not sustained six weeks after program completion. However, the study by Hayhurst et al. (2015) on enhancing resilience in youth through a 10-day developmental sailing voyage found the positive outcome of increased resilience to persist five months later, with predictors explaining a substantial portion of the variance (2015, p. 40). The findings suggest that blue therapy shows promise as an acceptable and feasible intervention for addressing mental health symptoms in children and adolescents, although sustained long-term effects require further investigation and program refinement.

Thus, the examined body of literature shows promise of blue care for psycho-social well-being but is not substantive enough to make claims on the longevity of the natural form of therapy. It is not clear what aspects of the programs influence the extent to which the psychological improvements persist and does not explain the variance between studies when it comes to longevity. In addition to this gap in the existing body of literature, this paper identifies two more gaps within the research regarding blue care that require attention. Firstly, the body of research conducted on the topic originates from first-world, Western contexts, thereby limiting its applicability to regions such as Africa, which confront distinct

socio-economic and environmental challenges. While the findings from Western-focused studies offer valuable insights, they may not fully encapsulate the nuanced realities and unique circumstances faced by post-colonial African countries, or post-apartheid South Africa. Consequently, there exists a pressing need for research endeavours that are sensitively attuned to the specific contexts and exigencies of African communities, fostering a more inclusive and globally representative discourse on the topic.

Secondly, another notable gap in the existing literature pertains to the predominant reliance on quantitative methodologies, with limited inclusion of qualitative inquiries. While quantitative studies offer valuable insights into the measurable outcomes and efficacy of interventions, they often overlook the nuanced 'why's' behind observed phenomena. Qualitative research, with its emphasis on exploring the underlying motivations, experiences, and perceptions of participants, is essential for delving deeper into the intricacies of blue care programs. Understanding the subjective perspectives and contextual nuances can provide invaluable insights into which aspects of these programs are effective, which are not, and why. Such insights are indispensable for refining and optimizing blue care interventions to ensure their long-term efficacy and sustainability. Thus, there is a compelling need for future research endeavours to incorporate qualitative methodologies alongside quantitative approaches, fostering a more comprehensive understanding of blue care interventions and their implications.

In conclusion, the reviewed literature demonstrates the significant short-term positive impact of blue care or therapy on mental health and psycho-social well-being. Studies consistently show improvements in self-esteem, self-efficacy, social confidence, and resilience among participants engaging in blue care interventions, particularly surf therapy programs. However, there is a noticeable lack of research exploring the long-term effects of these interventions. The existing assessments of longevity suggest that mental health

improvements may not be sustained over time, raising questions about the durability of these interventions. Additionally, the reviewed studies highlight the need for a more diverse and inclusive research approach, as the current body of literature is predominantly Western-focused, limiting its applicability to regions such as Africa, which face distinct challenges. Moreover, the reliance on quantitative methodologies overlooks valuable qualitative insights into the 'why's' behind observed outcomes, hindering our understanding of the underlying mechanisms of blue care interventions. Future research should address these gaps by incorporating qualitative methodologies and adopting a more globally representative perspective to ensure the effectiveness and sustainability of blue care interventions across diverse populations and contexts.

III. Theoretical Framework

“While the problem of humanization has always, from an axiological point of view, been humankind’s central problem, it now takes on the character of an inescapable concern. Concern for humanization leads at once to the recognition of dehumanization, not only as an ontological possibility but as an historical reality.” – Paulo Freire (1968/2017, p. 17)

Over recent decades, we have witnessed the detrimental repercussions of Western decontextualized research within the continent of Africa (Biglaiser & McGrauvran, 2022; Akpor-Robaro, 2018). By imposing Western-derived policies on issues such as HIV, devoid of consideration for local contexts, it is arguable that Western interventions have often caused more harm than good (Stillwaggon, 2009). This phenomenon underscores a profound legitimacy crisis in the realm of knowledge production (De Sousa Santos, 2014). Foucault (Miller, 1990) explained this predicament within his discourse theory, positing that power resides within discourse itself: discourse wields the authority to delineate what constitutes valid knowledge and what does not. Consequently, prevailing Western research paradigms and epistemologies exacerbate global disparities by imposing them upon the Global South (Ndlovu-Gatsheni, 2014). This leads to modern power structures where the agency of Africa is restrained (Ndlovu-Gatsheni, 2014).

Charting an alternative course is imperative to redirect this harmful trajectory. Fundamental to this endeavour is the concept of epistemologies of the South (De Sousa Santos, 2014), wherein the recognition of plural epistemologies is embraced. Embracing this *cognitive polyphasia* necessitates acknowledging the existence of multiple modes of comprehension and existence (Jovchelovitch, 2002). This paradigm shift does not advocate for the eradication of Western knowledge; rather, it advocates for the decentring of knowledge production as a pivotal stride toward fostering a more equitable future.

Given that our research conducted for the University of Amsterdam unfolded within the context of Cape Town, South Africa², it held great significance for us to dismantle the oppressive undercurrents ingrained in conventional research practices. Hence, we made a deliberate choice to embrace the philosophy adopted by Paulo Freire in his influential work, *Pedagogy of the Oppressed* (1968/2017), as a guiding beacon in our Participatory Action Research. This decision stemmed from a collective understanding of the importance of mitigating the negative and colonizing impacts that traditional research methodologies often perpetuate within the Global South. This implies that we view the participants as the “experts” of this research, and not ourselves as researchers. Freire's philosophy constitutes the foundation upon which we conceptualize our research, guiding not only our overarching perspective but also shaping the methodological framework with the aim of integrating his principles in a comprehensive manner.

At its core, Freire’s theory constitutes a postcolonial framework advocating for the emancipation of the marginalized through a cooperative educational approach (1968/2017, p. 1). Central to this theoretical framework are two concepts elucidated by Freire: *conscientização* and praxis. These concepts serve as lenses through which we interrogate the world, fostering critical consciousness and transformative action. By harnessing his principles, we try to build a research paradigm characterized by reciprocity, dialogue, and empowerment, thereby charting a course towards more equitable and emancipatory knowledge production practices.

² Nowhere is inequality so visible as in Cape Town. 60% of its population, almost all black, live in townships and informal settlements where gangs rule the area, almost no jobs exist and school and healthcare are severely underfunded. Nowadays, Cape Town is almost the exact replica of apartheid-era urban planning (Baker, 2019).

Conscientização

Conscientização refers to the journey of acquiring the ability to recognize social, political, and economic contradictions, and to act against the oppressive elements of this reality (1968/2017). For Paulo Freire, this marks the initial phase towards true liberation, a progression achievable solely through *conscientização*. Central to this process is the empowerment of the oppressed to uncover their own agency through dialogue and discourse (1968/2017, p. 21). Secondly comes that the marginalized analyse the systemic roots of their oppression, laying the groundwork for the collective efforts toward societal transformation (1968/2017, p. 21).

The critical understanding of reality, as elucidated by Freire through the concept of *conscientização*, intertwines with a commitment to transformation of the oppressive situation. At the heart of this transformative process, culminating in authentic liberation which makes the pursuit of a fuller humanity possible (1968/2017, p. 21), lies the Freirean praxis: the second fundamental concept underpinning this theoretical framework.

Praxis

Paulo Freire advances the notion that within the realm of language lies a dual dimension: reflection and action, constituting what he terms as the praxis. The interplay between reflection and action is so profoundly intertwined that if one is (even partly) sacrificed, that inevitably undermines the other (1968/2017, p. 60). Hence, the path to genuine transformation necessitates true commitment to the praxis. Freire elucidates this symbiotic relationship between reflection and action vividly:

“The insistence that the oppressed engage in reflection on their concrete situation is not a call to armchair revolution. On the contrary, reflection – true reflection – leads to action. On the

other hand, when the situation calls for action, that action will constitute an authentic praxis only if its consequences become the object of critical reflection.” (Freire, 1968/2017, p. 40)

Freire contends that having *trust* in the oppressed and their ability to reason is imperative for realizing this praxis, a concept pivotal to this research. As previously discussed, the imposition of Western epistemologies and theories as the sole legitimate forms of knowledge has often perpetuated harm rather than fostering genuine advancement. This resonates with Freire’s critique of the banking concept of education, where “knowledge is a gift bestowed by those who consider themselves knowledgeable upon those whom they consider to know nothing” (1968/2017, p. 45). Embracing the liberating Freirean praxis entails transcending this oppressive banking paradigm and is hence to commit to critical and liberating dialogue with the oppressed at every stage of their struggle (1968/2017, p. 39 & 41).

Trust emerges as the indispensable prerequisite for enacting the praxis and effecting revolutionary change: “A real humanist can be identified more by his trust in the people, which engages him in their struggle, than by a thousand actions in their favour without that trust” (Freire, 1968/2017, p. 34). With trust serving as the cornerstone of the theoretical framework, the subsequent imperative in this research journey is the continual re-examination of ourselves (Freire, 1968/2017, p. 34). A substantial component of this introspection involves reflecting upon situationality, as captured by Freire’s words:

“Humankind *emerge* from their *submersion* and acquire the ability to *intervene* in reality as it is unveiled. *Intervention* in reality – historical awareness itself – thus represents a step forward from *emergence*, and results from *conscientização* of the situation. *Conscientização* is the deepening of the attitude of awareness characteristic of all emergence.” (Freire, 1968/2017, p. 82).

In essence, the theoretical framework of this research advocates for a decolonial, co-intentional approach wherein both researchers and participants are positioned as Subjects. We, as Subjects, are tasked not only with unveiling reality, and thereby coming to know it critically, but also with co-creating knowledge and effecting change.

IV. Methodology

The methodology underpinning this research, which has been conducted over a time span of nearly a month (from January 5th till February 2nd, 2024), is rooted in Participatory Action Research (PAR), wherein *conscientização*, praxis, and dialogue serve as its foundational pillars. Echoing Paulo Freire's insights in *Pedagogy of the Oppressed*, PAR advocates for a collaborative approach where researchers and the community, typically seen as mere subjects of investigation, unite as co-investigators to mitigate the adverse and colonizing impacts of conventional research methodologies (1968/2017, p. 79). Central to PAR is the imperative to explore people's perceptions and actions within their lived realities, necessitating thorough attention to context (Baum et al., 2006). Recognizing our limitations as researchers unfamiliar with the specific context of South Africa, the PAR methodology empowers us to amplify the voices of those who possess expertise with this milieu: the individuals living within it.

PAR unfolds through a triadic process encompassing data collection, reflection, and action, all aimed at fostering participatory empowerment (Baum et al., 2006). Collaborative data collection predominantly involves unstructured interviews and observations, facilitated by the longitudinal nature of our study, fostering trust-based relationships with participants. Embracing an open interview approach, participants retain agency in determining the narrative, safeguarding against the misrepresentation of marginalized voices. Our sustained engagement with participants enables a comprehensive understanding of their lived realities.

Reflection constitutes an integral facet of PAR, occurring following interviews or observations. Reviewing daily notes and engaging in dialogue allows for diverse interpretations of situations to emerge, guiding subsequent inquiry. This process enables ongoing dialogue with participants, ensuring their perspectives remain central to the research.

The research unfolds across five phases. Initially, collaborative problem identification of the challenges confronted by marginalized children was done, informed by insights collected from interviews, observations, and informal conversations. It involves an in-depth exploration of the challenges faced by children in townships. Issues such as sexual abuse, gangsterism, domestic violence, and poverty will be investigated through a number of open interviews with participants and the collected data of The Little Optimist.

The second phase delves deeper into psychological-social mechanisms. Subsequent to understanding the challenges, the research will identify psychological and social mechanisms that could empower children to efficiently cope with these issues. Resilience, self-confidence, and other potential tools will be explored through interviews with participants as well. We will also make use of existing literature to get more insight into these mechanisms. In this part of the research, we will also highlight the importance of role models in the program of The Little Optimist. The third phase brings an Indigenous perspective to this research, underpinned by an open interview with Nicole Klassen. This phase aimed at including an Indigenous perspective on blue therapy in research where Western epistemologies predominantly dominate.

The analysis forms the crux of our inquiry, synthesizing observations, reflections, and experiences to offer a holistic understanding of The Little Optimist program's impact. This part involves direct observation of program activities, interviews, and an examination of program achievements. The analysis aims to provide a nuanced answer regarding the program's impact. This includes considering the unique characteristics of The Little Optimist' program. Ultimately, our findings culminate in recommendations co-created with The Little Optimist team, nurturing a collaborative ethos in effecting positive change, considering the context of its implementation.

Although PAR provides a dynamic framework for engagement, it is not without its limitations. The inductive nature of PAR may seem disorganized or “messy” at first glance; however, it is essential for capturing the multifaceted complexities inherent in reality, particularly in navigating the intricate landscape of the South African context. Nevertheless, due to the dialectical and inductive nature of PAR, not all findings are neatly summarized in the Appendices. While findings directly extracted from interviews are referenced and included in the Appendices, other insights stemming from informal conversations and participatory observations cannot be directly referenced in the same manner. This is a significant limitation of Participatory Action Research.

Since our study is bounded to one context, we will not generalize our findings on the basis of this one case. However, some analytical generalization can be made regarding the methodology for example. Additionally, the method does not allow a high number of participants which may limit its external validity. However, since this is a localized case study, we disregard this as a significant limitation. Lastly, PAR’s evolving nature warrants acknowledgment of trial and error in its application. Awareness should be raised about its binary view of power, the truly participatory nature of its methodology, and the results of the research. This prompts reflexivity in acknowledging and addressing limitations within our research process, which will be further elaborated on in the Reflection.

V. Challenges Faced by Youths in Marginalized Areas

“If I look at someone of the exact same age as me, living next door with the same conditions, except that they did not get this opportunity [working at The Little Optimist], you will see that they are struggling. Struggling to find a job, to support their family, to be inspired to do something. We are repeating the cycle, and nothing is changing in our areas.” - Male, 23 years old, from Grassy Park (Cape Flats), sailing instructor at The Little Optimist (see Appendix A)

Gangsterism

A prevalent problem we encountered in our work with people and children from marginalized communities in Cape Town is that of gangsterism. Gangsterism was identified as the biggest problem, particularly for boys and men, by sailing instructors and Erica Burger, manager at The Little Optimist. Erica described how gangs violently enter schools in the townships and particularly the Cape Flats, where they forcefully remove children (mostly boys, from an age of 10 years old) out of the classrooms to recruit them for their gangs. Schools therefore securitize their classrooms with gates behind every door and window. With each person entering or leaving that classroom, the gate has to be opened and closed again.

There seems to be a normalcy of gangsterism in the respective areas. One of the girls from Heideveld (Cape Flats) that participated in the sailing therapy, described how she hears “gunshots every day.” Multiple staff members of The Little Optimist described how the sailing instructors, who themselves come from the Cape Flats, would have had a bigger chance of entering a gang, than to end up in their current employment. A sailing instructor noted that “We [people in marginalized communities] believe that gangsterism is the only path that we have, the only path that we can walk, the only path that is going to give us something different in life [more money and opportunity]” (appendix A). He further

describes how many of his family members, friends, neighbours, and acquaintances are in gangsterism, and how it is “easy to be influenced by those around you” to enter these same circles. He expresses his own luck, in the sense that he has stayed out of violent activities and circles, but acknowledges this has been a constant struggle, persisting up until today.

A community caretaker and mentor of children from Heideveld confirmed these results and contributed that particularly for youths from around 14 to 15 years old, there is a risk for entering gangs (see appendix B). These children are ruthless and socially unaware, their morality is not yet fully developed, and this makes them particularly vulnerable, according to the participant. They would then close themselves off and are almost unreachable for parents and community leaders trying to intervene. In our observations and participation in sailing therapy sessions, we noted the difference in openness of young children (approximately aged 6 to 10), compared to youths (approximately aged 11 to 16). The latter were more reserved in their correspondence to us and the instructors, actions, and behaviour during the sessions.

Challenges Faced by Women

Challenges faced by women, such as sexual abuse and teenage pregnancies, are very prevalent in marginalized communities and thus deserve particular attention. Sexual abuse was pointed out by Erica as the most prevalent problem for women in marginalized communities in Cape Town (see appendix C). However, we noted that there was little space in our research to further investigate this. There seems to be a taboo in talking about such issues in the respective communities we worked with. We, as researchers, understand that these topics are of high sensitivity to a woman, which requires our caution in inquiring about this. Given the relatively short time-span of our research, and the fact we were just embarking

on creating personal relationships with our participants, we did not deem it appropriate to ask questions about this to our participants.

However, there were few instances where participants shared some information about these issues spontaneously. For instance, teenage pregnancies were by several of our participants pointed towards as a commonality amongst marginalized communities, with 16 to 17 years old to be a normal age for females to have a child. Often, they do not have the financial capacity to provide care for them, leaving them with no choice other than their parents providing care for them. We have observed two females in such a situation, whose children are now with their respective parents on the other side of South Africa in the Eastern Cape. Those women see their children around once a year only, and described how this is a very difficult situation for them.

Lack of Opportunities

The lack of opportunities emerged as a theme in many of our conversations. Specifically, a lack of access to quality education seems to be a problem in townships and Cape Flats. Multiple participants described the massive inequality when it comes to the quality of schooling. Public schools, in contrast to private schools, were said to be extremely bad, with little learning resources and offering no opportunity or inspiration to youths. One of the sailing instructors described: “This further keeps the structural knowledge and economic inequality intact. Who is teaching us? I am asking for an opportunity to be taught” (see appendix A).

Furthermore, there are notable differences in the sailing programs for the paid clients, in which children from privileged backgrounds participate, in comparison to the children that come for surfing therapy and are from marginalized areas. Clients are confident in their swimming; they have had swimming lessons and are used to the water. However, for the

children participating in the therapy sessions this is a different story. Where they grew up, they were never provided with swimming lessons and hence, they are afraid of the water. These problems were described by many employees at The Little Optimist. In addition, we observed a girl participating in the sailing therapy that was extremely afraid of the water - regardless of the guidance of instructors and the safety of a life vest. She would only enter her sailboat after three hours of watching her peers from the shore.

Lack of Motivation and Inspiration

A community caretaker and mentor from Heideveld described a ‘culture of laziness,’ in which people in marginalized communities lack inspiration and motivation to advance themselves (see appendix B). They grow up with the idea of being and, hence, staying poor. Therefore, they do not want to work or take on opportunities, or initiatives to enhance their lives. Two participants described how people in marginalized areas have low self-esteem, and little confidence that they can do something other than begging or participating in violent behaviour, creating a fear of going outside this path that lies in front of them. It is significant to note that all participants attributed the cause of this pessimism to external influences and culture, not an inherent tendency of marginalized people and youths.

Cycles of Violence

In conclusion, people from marginalized communities in Cape Town seem to face ‘cycles of violence,’ in which one problem leads to another and they supplement each other. For instance, participation in gangsterism can be attributed to a lack of opportunity and accessibility of quality schooling, which is supplemented by a lack of motivation and inspiration. In absence of opportunity, one cannot expect people to be inspired and take responsibility. Participants described the commonality of their peers and family to be

struggling, financially and mentally, and how this led them to behave violently. One of the sailing instructors described: “It is easy to be trapped in this position, there is no one that is telling them that there is a way out of gangsterism and poverty. They believe they are stuck, it is tough, and it is so hard to get out. That is how the cycle is perpetuated.” (appendix A).

A sailing instructor described to us how even when one can leave such a cycle once, for instance through finding employment, there is a high chance of falling back into them. “For me and many people from these areas, we can’t afford to mess up, ... not even for once, for one moment, nothing.” “And that is why you’ll see that sometimes I’m so stressed If I would not have been here today [employed by the Little Optimist], I promise you that tomorrow ... [would] not look good for me.” (appendix A).

VI. Identification of Psycho-Social Mechanisms for Empowerment

The challenges, as presented in the previous section, that children and youths from marginalized communities in Cape Town face are, rather obviously, not easy to solve. A non-profit organization such as The Little Optimist does not aim to change these deeply ingrained socio-economic structures that are the legacy of colonialism and the apartheid regime. It is important to note that no individual organization would be able to solve such large and complex systemic issues. On the other hand, what The Little Optimist endeavours is to help these children in empowering themselves, providing them with experiences in which they can build necessary psycho-social mechanisms that can serve as tools to deal with their adversities. From our interviews, observations, and informal conversations with community caretakers and mentors, sailing instructors and leaders of The Little Optimist, as well as the children themselves, several of such psychological and social mechanisms emerged. These were identified as helping the youths ‘from the ground up’ because psychological wellbeing as a result of efficient coping with daily challenges can have a myriad of positive outcomes. Its core is in empowering those that are marginalized.

One of the key psycho-social factors for empowerment that emerged is the enhancement of confidence. Our collected information reveals a significant transformation in children’s attitudes post-sailing therapy, with a notable increase in confidence. Building confidence, especially in situations where fear is prevalent, is confirmed by multiple participants as a critical aspect of effective coping mechanisms as it enhances one’s trust and self-efficacy. This enables people to step outside of the cycle of violence that is so prevalent in their environment. This shift is particularly striking when compared to children of more wealthy backgrounds who had prior swimming lessons and were already familiar and comfortable with water activities.

Optimism and self-esteem are identified as additional mechanisms that empower children to cope with challenges. A community caretaker and mentor emphasizes the importance of changing the environment for marginalized children regularly, as it exposes them to alternative possibilities beyond their standard settings (appendix B). Activities where trips are organized outside their usual surroundings contribute to an increased sense of optimism and self-esteem. As an explanation, he suggests that breaking away from the limitations imposed by their environments can positively impact the children's beliefs in their abilities to achieve something beyond what they may have initially perceived as their only options.

These factors - confidence, optimism, and self-esteem - were mentioned by different participants as helpful in dealing with adversities. However, it can be argued that although they labelled them differently, they construct meaning around these mechanisms similarly. Confidence, optimism, and self-esteem were all denoted as empowering, because they motivate a marginalized child to expand their horizon and enhance their self-efficacy of achieving something outside a cycle of violence. In that sense, they might be considered as similar constructs and used interchangeably in the context of psycho-social mechanisms that may empower marginalized youths in Cape Town. Particularly, these factors may bring changes into the 'culture of laziness' that was identified as one of the challenges. Optimism can eradicate pessimism and the idea of 'being stuck,' which are inherent to the culture of laziness.

Exposure to different perspectives and positive role models is another influential mechanism. A sailing instructor emphasized the role of awareness and the importance of demonstrating through personal experiences that their current circumstances do not dictate their future. Exposure to success stories, such as those represented by the sailing instructors who came from similar environments, serves as an inspiration for marginalized youth. Role

models are the confirmation that there is something possible outside of violent circles. In turn, role models might enhance self-esteem, confidence, and optimism again.

Lastly, exposure to water is found as a key factor in enhancing coping with adversities. Participants, like one of the sailing instructors, described being exposed to blue natural water spaces makes all his worries “float away,” as it provides one with the “feeling of being part of something bigger”. Additionally, we observed a change in attitude and stress levels amongst children after, as compared to before, the sailing therapy sessions. Furthermore, we experienced stress relief and increased relaxation ourselves when we participated in the blue therapy interventions of The Little Optimist and surfing therapy initiative 9Miles. The positive effect of exposure to water on coping with adversities was further underscored in the reviewed Western literature. In addition, the benefits of water therapy have been strongly emphasized for centuries when taking Indigenous knowledge systems into account, as elaborated on further in the following section.

VII. Indigenous Perspective

In recent years, the therapeutic potential of blue care interventions, utilizing natural water settings to promote mental health and psycho-social well-being, has gained significant attention in academic literature (Britton, 2020). However, the existing body of research predominantly stems from Western contexts, overlooking the nuanced realities and unique circumstances communities face in African countries, particularly post-colonial South Africa. To address this gap, it is essential to incorporate Indigenous perspectives into the analysis of blue care and therapy, as these perspectives offer invaluable insights rooted in cultural heritage, spirituality, and intergenerational knowledge. Therefore, we conducted an interview with Nicole Klassen, who through her research and her own ethnicity as Indigenous South African, has gained much expertise on the subject.

Nicole Klassen engages in research within the field of family system constellation, where her focus lies on addressing the intergenerational trauma stemming from colonialism and apartheid (see interview notes in appendix D). Klassen explains that, throughout the colonial era, Indigenous communities in South Africa faced persecution, prompting them to scatter across the country and distance themselves from their cultural identities to evade detection. This displacement resulted in the erasure of Indigenous languages, lands, medicinal practices, and heritage. Nicole Klassen addresses the importance of reconnecting with Indigenous cultural practices, knowledge, and medicine to tackle the intergenerational trauma that is present within the community.

According to Klassen, healing within Indigenous cultures is deeply intertwined with Indigenous knowledge systems. Historically, the focal point of knowledge was the Cape Matriarch, with the Ausidi (Ausi) women serving as custodians of Indigenous wisdom. However, alternative forms of Indigenous knowledge, rooted in spirituality and the natural

world, also exist. Water, for example, possesses a unique ability to retain memories and emotions shared with it. Each body of water carries distinct recollections of its encounters, which can be exchanged and amalgamated when bodies of water are interconnected. Within Indigenous communities, it is believed that ancestral wisdom is preserved and disseminated by nature itself, with human ancestors intricately linked to the natural world. Despite the ancient lineage of water therapy in South Africa, contemporary Western perceptions often portray blue care and therapy as novel concepts, while Indigenous communities have relied on water therapy for centuries. Therefore, Klassen states, water therapy is one of the oldest medicinal practices in South Africa, and quite possibly, the world.

Klassen explains that water therapy encompasses various therapeutic practices, including water ceremonies, to address trauma and promote healing. Its medicinal properties include regulating the nervous system, fostering connectedness with nature and others, inducing meditation-like states, and facilitating surrender and trust. Given the profound intergenerational trauma experienced by Indigenous communities, there is a heightened imperative to reclaim and revitalize ancestral knowledge and healing traditions, making water therapy and connection with local water sources essential. Moreover, Klassen states that in the absence of accessible psychological support in marginalized South African communities, free and accessible resources such as bodies of water play a crucial role in promoting mental well-being.

In conclusion, exploring blue care interventions and water therapy in addressing mental health challenges has underscored the significance of incorporating Indigenous perspectives, particularly in contexts shaped by colonial legacies like South Africa. Nicole Klassen's research emphasizes reconnecting with Indigenous knowledge systems and cultural practices to address intergenerational trauma within communities. Indigenous wisdom, deeply rooted in spirituality and the natural world, offers invaluable insights into the

therapeutic potential of water and the significance of ancestral healing traditions. As contemporary approaches increasingly recognize the benefits of water therapy, it is essential to acknowledge and respect the ancient lineage of these practices within Indigenous communities, ensuring that efforts to promote mental well-being are culturally sensitive and inclusive. By reclaiming and revitalizing ancestral knowledge, communities can foster resilience and healing, ultimately contributing to more holistic approaches to mental health care in diverse cultural contexts.

VIII. The Efficacy of The Little Optimist Program

In exploring the efficacy of The Little Optimist's sailing therapy as a means to empower marginalized youth in Cape Town, this analysis delves into the challenges faced by these youths, the psycho-social mechanisms engendered by blue therapy, and the extent to which the program teaches these mechanisms. Drawing from participatory action research methodology, insights are garnered from interviews with those involved in The Little Optimist program and external experts.

Overview of Challenges Faced by Marginalized Youths

In exploring the challenges faced by marginalized youths in Cape Town, the analysis reveals a multifaceted landscape of adversities including gangsterism, violence, sexual abuse, teenage pregnancies, and a dearth of opportunities, particularly in education. These challenges intertwine to form what can be termed as 'cycles of violence,' wherein one problem exacerbates another, perpetuating a cycle of hardship. Participants voiced the prevalence of these challenges within their communities and highlighted the lack of inspiration and motivation due to lack of opportunities and low self-esteem. One sailing instructor encapsulated this sentiment, noting the entrenched belief among youths that they are trapped in their circumstances, contributing to the perpetuation of the cycle. This investigation of the challenges faced by marginalized youths was conducted in the first part of the analysis.

Mechanisms Induced by Blue Therapy

Through participatory interviews and a review of existing literature, several psycho-social mechanisms induced by blue therapy, specifically sailing therapy, emerged. These mechanisms include the cultivation of confidence, optimism, self-esteem, exposure to new

experiences and water, and, uniquely attributable to The Little Optimist, the provision of positive role models. Existing literature further substantiates the efficacy of blue therapy in fostering resilience, self-efficacy, social confidence, and a sense of belonging, thereby facilitating active control over one's circumstances and mitigating symptoms of psychological distress.

It is notable that these mechanisms align closely with the challenges identified in marginalized communities, suggesting a potential avenue for addressing and navigating these difficulties.

Evaluation of The Little Optimist Program

The efficacy of The Little Optimist program in providing marginalized youth with the aforementioned mechanisms requires careful examination. While the program's duration is limited to a single day, posing challenges in achieving sustained impact as per existing literature, the distinctive contextual factors pertinent to South Africa necessitate a nuanced evaluation.

Program Duration and Escapism

The efficacy of The Little Optimist program is scrutinized concerning its duration and potential for escapism. While acknowledging the transformative potential of prolonged engagement, concerns arise regarding the current one-day format of the program. In concurrence with findings from existing literature on blue therapy, Vuyisa Qabaka aptly observed: "Many programs become escapism.... It is important that children participate for a longer time... at first, it is only escapism, only afterwards they can develop a sense of true passion.... Exposure can only over time lead to value and value propositions" (appendix E). However, contextual nuances specific to South Africa necessitate re-evaluation, considering

that existing literature predominantly stems from quantitative experiments conducted in Western contexts. Moreover, while acknowledging the inherent element of escapism in the program, as noted by Qabaka, it is evident that such escapism serves a constructive purpose within the framework of The Little Optimist.

Contextual Relevance and Effectiveness

Despite the program's brevity, empirical evidence suggests its efficacy within the South African context. In relation to the escapism as mentioned before, community caretaker and mentor noted: "Programs like these have a big impact because kids leave the cycles of violence they face.... It shows them there are other possibilities, enhancing confidence that they can achieve something" (appendix B). He further elaborated that the program installs confidence and broadens children's perspectives. This ties into the 'culture of laziness' in which low self-esteem is a big problem, as explained in the first part of the analysis. The exposure to different situations and opportunities, which is achieved in the program of The Little Optimist, disrupts the normalcy of gangsterism and violence. Taking the specific complexity of Cape Town, and in a broader sense post-colonial South Africa, into account, allows us to see the efficacy of the program of The Little Optimist in breaking the cycles of violence marginalized children face, which is the main challenge they have to learn to navigate.

A sailing instructor underscores the transformative impact of sailing therapy with narratives of personal growth and emancipation from cyclical violence. His testimonial illustrates this, reflecting on his journey from insecurity to newfound confidence: "Lifechanging.... I am much better not just financially but physically, mentally, and in all aspects of my life. To say in a nutshell, it brought me out of my shell, if that makes sense" (appendix A).

The sailing instructor also underscored the importance of The Little Optimist's "escapism" from the townships and Cape Flats the marginalized children live in, and he himself also lives in: "I promise you if anyone from the place that we come from comes here, they would never want to leave this place ever. They would not want to go back to that place because it is tough" (appendix A). This quote illustrates the importance of The Little Optimist in showing marginalized children that there is a world outside of the places they grow up in, where violence is at the order of the day. He continues to say that "it is about creating awareness. About where they are right now is not where they must stay, and we are examples of that, [co-worker] and I are examples of what is possible. There is a way out for them" (appendix A). This touches upon two important things regarding the efficacy of the program of The Little Optimist. Firstly, it shows again that the program shows the children a way out: "It is so easy to be trapped in a position, there is no one that is telling them [marginalized communities] that there is a way out.... They believe they are stuck" (appendix A). Secondly, it illustrates the importance of the role models working in the program of The Little Optimist. They exemplify the breaking of cyclical violence, as the marginalized children can experience that there are other paths than those of violence and gangsterism.

In a related vein, it is important to acknowledge that these marginalized children sometimes have never seen the ocean in their lives, despite Cape Town being situated at the coast. Transport for a day to the beach is often too expensive and not a priority for parents, as noted by Greg Bertish and Erica Burger (2024). The day they spend at The Little Optimist is very special for them, as they have never experienced anything like it before. This realization is crucial, and its context is so specific to Africa that the failure to consider it in the existing body of literature raises significant questions about its applicability to the case of The Little Optimist.

Additionally, we want to add that water and nature are free forms of therapy, as noted by Nicole Klassen (appendix D). Since therapy is so inaccessible for these marginalized children in South Africa, teaching them young the healing powers of blue spaces – both confirmed by existing Western literature and Indigenous knowledge systems – can be beneficial for mental health throughout their life.

Lastly, The Little Optimist is endeavouring to secure funding to extend their one-day program to a six-week program, a move that would enhance its efficacy. Community partners responsible for bringing children into The Little Optimist program have already observed a considerable and positive impact on the children, despite its current brevity. With the resources presently at their disposal, the program has proven effective in fostering psychosocial mechanisms among marginalized youth. It is anticipated that this effect will further amplify upon program extension.

Holistic Approach and Collaborative Endeavours

Despite the evident effectiveness of The Little Optimist’s program in empowering marginalized youth, a pertinent question arises regarding its ambition in addressing issues at the top of the Maslowian hierarchy (see figure 1). Is it overly optimistic to target confidence and

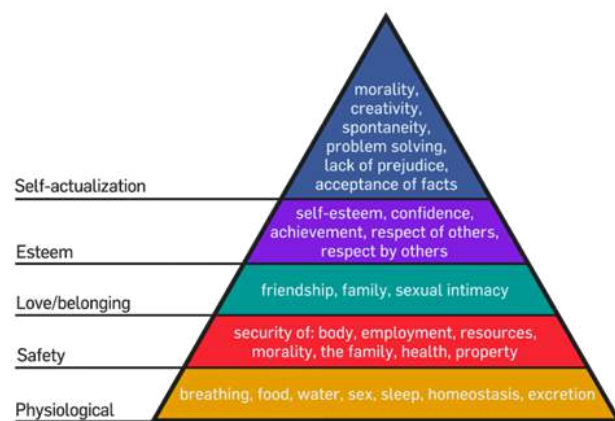


Figure 1: Maslow pyramid (Thompson, n.d.).

resilience, which are part of the ‘esteem’ needs in the pyramid, when the daily lives of these children are entrenched in poverty, violence, and inadequate education? For example, organizations such as 9Miles, adopt a more holistic, grassroots approach (9Miles Project, n.d.). 9Miles is an initiative by Nigel and Sher’Neil at Strandfontein Pavilion. Nigel and Sher’Neil

started their charity by providing food to the people living in the surrounding communities. The provision of these basic needs from the physiological and safety category by 9Miles, grew out to a larger community centre where education, music and theatre classes, and surf-therapy is provided. Hence, 9Miles only addressed psycho-social elements after providing basic needs to the community. Is that not a more efficient way to address issues in a country so complex and unequal as South Africa?

However, two observations suggest that this may not be the case. Firstly, the sustained efforts of The Little Optimist program, particularly through its community partnerships and trust, underscore its longitudinal commitment and impact. The program actively engages in long-term relationships with marginalized communities, providing community caretakers and mentors with resources such as educational materials or funds for renovation of children's hospitals, thus demonstrating a comprehensive approach. Secondly, while 9Miles takes a more holistic approach, it is limited by its localized nature. Although effective within its immediate community, its outreach is constrained compared to The Little Optimist, which serves a broader spectrum of marginalized communities around Cape Town. Thus, despite the divergent approaches, both organizations play crucial roles in addressing the multifaceted challenges faced by marginalized youth in South Africa.

Concluding on The Research Question

In conclusion, the analysis of The Little Optimist's sailing therapy program offers compelling insights into its efficacy in providing marginalized children in Cape Town with vital psycho-social mechanisms to navigate their challenges. Through participatory action research and interviews, it became evident that marginalized youths in Cape Town face multifaceted adversities, including gangsterism, violence, and a lack of opportunities, which perpetuate cycles of hardship. Blue therapy, particularly sailing therapy, has been shown to

induce essential psycho-social mechanisms such as confidence, optimism, and exposure to new experiences, aligning closely with the challenges faced by these youths.

Despite the brevity of The Little Optimist's program, empirical evidence suggests its efficacy within the South African context. The program not only provides an escape from the cycles of violence but also broadens children's perspectives and instils confidence, as evidenced by testimonials from participants and instructors alike. Importantly, the program serves as a beacon of hope, demonstrating to marginalized children that there are alternative paths beyond violence and gangsterism. Moreover, the program's emphasis on positive role models from within the community further reinforces this message of possibility and resilience.

The significance of contextual factors, such as the lack of access to the ocean for many marginalized children, underscores the importance of programs like The Little Optimist in providing unique and transformative experiences. Furthermore, the endeavour to extend the program's duration to six weeks holds promise for further amplifying its impact on fostering psycho-social mechanisms among marginalized youth.

While questions persist regarding the program's focus on esteem needs versus more immediate physiological and safety needs, in Maslowian terms, the sustained efforts of The Little Optimist, coupled with its broad outreach and collaborative approach, underscore its vital role in addressing the complex challenges faced by marginalized youth in South Africa. Despite differing approaches, organizations like The Little Optimist and 9Miles play complementary roles in providing holistic support to marginalized communities, each contributing to the overarching goal of empowering youth and breaking cycles of adversity.

In response to the research question, "In what way does The Little Optimist's sailing therapy provide marginalized children in Cape Town with the necessary psycho-social mechanisms to navigate the challenges they face?" the findings suggest that The Little

Optimist's program plays a significant role in equipping marginalized children with essential psycho-social mechanisms, offering resilience, optimism, and self-confidence in the face of adversity.

IX. Recommendations Co-Created with The Little Optimist Team

In light of the findings regarding the efficacy of The Little Optimist program in empowering marginalized youth in Cape Town, this section offers actionable recommendations aimed at enhancing the program's impact and sustainability. The recommendations which we will discuss were co-created with The Little Optimist team, and address key areas such as program expansion, funding, and the role of role models and community caretakers and mentors.

First, extending the duration of The Little Optimist program beyond its current one-day format is recommended to deepen participant engagement and maximize therapeutic benefits. A shift towards a more extended program, such as the proposed six-week initiative, could provide marginalized youth with prolonged exposure to transformative experiences, fostering lasting psycho-social development. For this aim, adequate financial resources are essential for the successful implementation and expansion of The Little Optimist program. To address existing funding challenges, proactive efforts should be made to explore various avenues for financial support. This may include strengthening connections with European sailing communities, leveraging potential donor networks, and seeking grant opportunities from governmental and non-governmental sources.

Second, the pivotal role of positive role models and community caretakers and mentors within The Little Optimist program cannot be overstated. It is imperative to highlight the significance of these individuals in sustaining the program's impact beyond its duration. To this end, efforts should be directed towards empowering role models and caregivers, providing them with training, resources, and ongoing support to reinforce program teachings within participants' home environments.

These recommendations aim to augment the effectiveness and sustainability of The Little Optimist program, offering a pathway towards continued empowerment and resilience for marginalized youth in Cape Town. By expanding program duration, securing adequate funding, and prioritizing the role of role models and caregivers, The Little Optimist can further its mission of providing vital psycho-social mechanisms to navigate the challenges faced by vulnerable children, ultimately fostering hope and opportunity in the face of adversity.

X. Reflection

“Lastly, PAR’s evolving nature warrants acknowledgment of trial and error in its application. Awareness should be raised about its binary view of power, the truly participatory nature of its methodology, and the results of the research. This prompts reflexivity in acknowledging and addressing limitations within our research process, which will be further elaborated on in the Reflection.” (Excerpt from the Methodology, p. 23)

Reflecting on our positionality, methodology, and biases, we firstly want to assert that the research was conducted during an unpaid internship at The Little Optimist. Therefore, as researchers, absolute objectivity is simply impossible to attain. The Participatory Action Research methodology is inherently a subjective research method and is based on the subjective perceptions and observations of both the participants and researchers. Therefore, objective results cannot be attained, and caution should be implemented when interpreting or generalizing the obtained results. However, we recommend that researchers investigating abroad, in contexts unknown to them, consider employing a methodology akin to Participatory Action Research. This approach facilitates the incorporation of the intricate nuances inherent in unfamiliar realities into the research process.

From a personally reflective viewpoint, we would once again like to critically relate our research to our positionality. It is important to acknowledge that where we come from, in the Netherlands, we do not have a concept of inequality like that in South Africa - never before have we seen such big socio-economic differences, and we are not used to experiencing them. With the participatory nature of our study, we endeavoured to give an open space and create - as much as that is possible - equal relationships with our participants, to give them a voice, and explain to us their lives. However, we must not forget that we are inherently biased due to differences in our perceptions of varying realities. We can listen, and hear, but never fully understand what it means. We come from worlds apart.

XI. Conclusion

In conclusion, this research paper has explored the efficacy of The Little Optimist's sailing therapy program in empowering marginalized youth in Cape Town, South Africa. Through a comprehensive analysis of the challenges faced by marginalized youths, the psycho-social mechanisms induced by blue therapy, and the evaluation of The Little Optimist program, significant insights into the therapeutic potential of natural water settings and the transformative impact of community-based initiatives have been gained.

This research paper started with the review of the existing body Western literature on blue therapy. Though the short-term benefits of blue therapy were underscored by the research we reviewed, there were significant gaps in the literature regarding the African context and qualitative research. For the purpose of gaining more insights into blue therapy in this gap of literature, the Indigenous perspective, as voiced by Nicole Klassen, was employed as well in the analysis.

Additionally, in order to address the gaps in the literature, Paulo Freire's *Pedagogy of the Oppressed* provided the theoretical framework, allowing for the principles of *conscientização* and praxis to guide the research. This gave the stage to local stakeholders involved with the program. The choice for a Participatory Action Research (PAR) methodology, including unstructured interviews, observations, conversations, and participation, aligned with this theoretical framework.

The analysis found that the challenges facing marginalized youths in Cape Town are complex and intertwined, encompassing issues such as gangsterism, women-specific challenges, limited opportunities, and limited inspiration and motivation. These challenges form 'cycles of violence' that perpetuate feelings of inability and low self-esteem within marginalized communities.

Blue therapy, particularly sailing therapy offered by The Little Optimist, has been shown to induce essential psycho-social mechanisms such as confidence, optimism, and exposure to new experiences. Testimonials from participants and instructors underscore the transformative impact of the program, highlighting personal growth and the awareness regarding opportunities.

Despite the program's brevity and focus on esteem needs, empirical evidence collected in this research suggests its efficacy within the South African context, with findings indicating positive outcomes in equipping marginalized youth with the psycho-social mechanism to navigate the day-to-day challenges they face.

In conclusion, the findings of this research paper highlight the significant impact of The Little Optimist's sailing therapy program in empowering marginalized youth in Cape Town. By fostering the development of essential psycho-social mechanisms and providing transformative experiences, the program offers hope and resilience in the face of adversity, ultimately contributing to the broader goal of breaking cycles of violence and fostering positive change within marginalized communities in South Africa.

As we continue to explore and advocate for innovative approaches to empower those that are marginalized, let us remain steadfast in advocating for a decolonial, co-intentional approach. By embracing cultural sensitivity, we can chart a course towards a more inclusive and empowering future for marginalized youth in South Africa and beyond.

XII. Reference List

- 9Miles Project. (n.d.). *9Miles Project*. 9Miles. <https://9milesproject.org/>
- Akpor-Robaro, M. O. (2018). Why do management theories fail? Reasons and solutions: a perspective of African context.
https://web.archive.org/web/20190220131331id_/http://pdfs.semanticscholar.org/2415/e53dd76f6069445dffe499a041921619c1b7.pdf
- Baker, A. (2019, May 2). What South Africa can teach us as worldwide inequality grows. *Time*. <https://time.com/longform/south-africa-unequal-country/>
- Baron, S.W. (2003). Self-control, social consequences, and criminal behavior: Street youth and the general theory of crime. *Journal of Research in Crime and Delinquency*, 40, 403–435. <https://doi.org/10.1177/0022427803256071>
- Baum, F., MacDougall, C., & Smith, D. (2006). Participatory action research. *Journal of epidemiology and community health*, 60(10), 854-857.
- Biglaiser, G., & McGauvran, R. J. (2022). The effects of IMF loan conditions on poverty in the developing world. *Journal of International Relations and Development*, 25(3), 806-833. <https://link.springer.com/article/10.1057/s41268-022-00263-1>
- Britton, E., Kindermann, G., Domegan, C., & Carlin, C. (2020). Blue care: A systematic review of blue space interventions for health and wellbeing. *Health promotion international*, 35(1), 50-69. <https://academic.oup.com/heapro/article/35/1/50/5252008>
- Capurso M., Borsci S. (2013). Effects of a tall ship sail training experience on adolescents' self-concept. *International Journal of Educational Research*, 58, 15–24.
<https://www.sciencedirect.com/science/article/pii/S0883035513000050>
- CSVr (Centre for the Study of Violence and Reconciliation). (2008). *Streets of Pain, Streets of Sorrow: The Circumstances of the Occurrence of Murder in Six Areas with High*

Murder Rates. Report by the Centre for the Study of Violence and Reconciliation, Braamfontein, South Africa.

De Sousa Santos, B. (2014). *Epistemologies of the South: Justice against Epistemicide*.

Routledge. https://unescochair-cbrsr.org/pdf/resource/Epistemologies_of_the_South.pdf

Donson, H. (2008). A profile of fatal injuries in South Africa 2007. *Tygerberg: MRC-UNISA Crime, Violence and Injury Lead Programme*.

Freire, P. (2017). *Pedagogy of the Oppressed*. Penguin Books. (Original work published 1968)

Grocott, A. C., & Hunter, J. A. (2009). Increases in global and domain specific self-esteem following a 10 day developmental voyage. *Social Psychology of Education, 12*, 443-459.

Groenewald, P., Bradshaw, D., Daniels, J., Zinyakatira, N., Matzopoulos, R., Bourne, D., & Naledi, T. (2010). Differential health needs of the population in Cape Town, South Africa: Local-level mortality surveillance in resource-limited settings: a case study of the City of Cape Town highlights disparities in health. *Bulletin of the World Health Organization, 88*(6), 444. <https://doi.org/10.2471/BLT.09.069435>

Hayhurst, J., Hunter, J. A., Kafka, S., & Boyes, M. (2015). Enhancing resilience in youth through a 10-day developmental voyage. *Journal of Adventure Education & Outdoor Learning, 15*(1), 40-52.

<https://www.tandfonline.com/doi/full/10.1080/14729679.2013.843143>

Jovchelovitch, S. (2002). Re-thinking the diversity of knowledge: Cognitive polyphasia, belief and representation. *Psychologie et société, 5*(1), 121-138.

<https://eprints.lse.ac.uk/2628/>

- Lindegaard, M. R. (2018). *Surviving gangs, violence and racism in Cape Town: ghetto chameleons*. Routledge.
- Matzopoulos, R., Bowman, B., Mathews, S., & Myers, J. (2010). Applying upstream interventions for interpersonal violence prevention: an uphill struggle in low-to middle-income contexts. *Health Policy*, 97(1), 62-70.
<https://doi.org/10.1016/j.healthpol.2010.03.003>
- Matzopoulos, R. G., Thompson, M. L., & Myers, J. E. (2014). Firearm and nonfirearm homicide in 5 South African cities: a retrospective population-based study. *American journal of public health*, 104(3), 455-460. <https://doi.org/10.2105/AJPH.2013.310650>
- Matzopoulos, R., Bhalla, K., & Harrison, J. (2015a). Homicide. *Oxford Textbook of Violence Prevention: Epidemiology, Evidence, and Policy*.
- Matzopoulos, R., Prinsloo, M., Wyk, V. P. V., Gwebushe, N., Mathews, S., Martin, L. J., ... & Bradshaw, D. (2015b). Injury-related mortality in South Africa: a retrospective descriptive study of postmortem investigations. *Bulletin of the World Health Organization*, 93, 303-313. <https://doi.org/10.2471/BLT.14.145771>
- Matzopoulos, R., Bloch, K., Lloyd, S., Berens, C., Bowman, B., Myers, J., & Thompson, M. L. (2020). Urban upgrading and levels of interpersonal violence in Cape Town, South Africa: The violence prevention through urban upgrading programme. *Social Science & Medicine (1982)*, 255, 112978–112979.
<https://doi.org/10.1016/j.socscimed.2020.112978>
- McKenzie, R. J., Chambers, T. P., Perry, K. N., Pilgrim, J., & Ward, P. (2021). “Feels good to get wet”: The unique affordances of surf therapy among Australian youth. *Frontiers in Psychology*, 12. <https://doi.org/10.3389/fpsyg.2021.721238>
- Miller, S. (1990). Foucault on discourse and power. *Theoria: A Journal of Social and Political Theory*, (76), 115-125. <https://www.jstor.org/stable/41801502>

- Muthukrishna, M., Bell, A. R., Henrich, J., Curtin, C. M., Gedranovich, A., McInerney, J., & Thue, B. (2020). Beyond western, educated, industrial, rich, and democratic (WEIRD) psychology: measuring and mapping scales of cultural and psychological distance. *Psychological Science, 31*(6), 678–701. <https://doi.org/10.1177/0956797620916782>
- Ndlovu-Gatsheni, S. J. (2014). Global coloniality and the challenges of creating African futures. *The Strategic Review for Southern Africa, 36*(2).
https://www.upjournals.up.ac.za/index.php/strategic_review/article/view/189
- North, M. A., Hastie, W. W., & Hoyer, L. (2020). Out of Africa: The underrepresentation of African authors in high-impact geoscience literature. *Earth-Science Reviews, 208*, 103262. <https://doi.org/10.1016/j.earscirev.2020.103262>
- Olive, L., Dober, M., Mazza, C., Turner, A., Mohebbi, M., Berk, M., & Telford, R. M. (2023). Surf therapy for improving child and adolescent mental health: A pilot randomised control trial. *Psychology of Sport and Exercise, 65*, 102349.
<https://doi.org/10.1016/j.psychsport.2022.102349>
- Pillay-Van Wyk, V., Msemburi, W., Laubscher, R., Dorrington, R., Groenewald, P., Glass, T. R., Nojilana, B., Joubert, J., Matzopoulos, R., Prinsloo, M., Nannan, N., Gwebushe, N., Vos, T., Somdyala, N. I. M., Sithole, N., Neethling, I., Nicol, E., Rossouw, A., & Bradshaw, D. (2016). Mortality trends and differentials in South Africa from 1997 to 2012: second National Burden of Disease Study. *The Lancet Global Health, 4*(9), e642–e653. [https://doi.org/10.1016/s2214-109x\(16\)30113-9](https://doi.org/10.1016/s2214-109x(16)30113-9)
- Ritchie, S. D., Wabano, M. J., Corbiere, R. G., Restoule, B. M., Russell, K. C., & Young, N. L. (2015). Connecting to the Good Life through outdoor adventure leadership experiences designed for Indigenous youth. *Journal of Adventure Education and Outdoor Learning, 15*(4), 350-370. <https://doi.org/10.1080/14729679.2015.1036455>

Rutter, M. (1987). Psychosocial resilience and protective mechanisms. *American Journal of Orthopsychiatry*, 57, 316–331.

<https://psycnet.apa.org/doiLanding?doi=10.1111%2Fj.1939-0025.1987.tb03541.x>

Stillwaggon, E. (2009). Complexity, cofactors, and the failure of AIDS policy in Africa.

Journal of the International AIDS Society, 12(1), 1-9.

<https://jiasociety.biomedcentral.com/articles/10.1186/1758-2652-12-12>

The Little Optimist Sailing Academy. (n.d.). *Sailing Therapy*. Retrieved February 28, 2024,

from <https://optimistsailingacademy.org/sailing-therapy/>

Thompson, L. (n.d.). *Maslow's Pyramid*. MarketCopywriter Blog.

<https://marketcopywriterblog.com/5-ways-maslows-pyramid-adds-explosive-power-to-your-content-marketing/>

United Nations Development Programme. (2024). *Sustainable development goals*. UNDP.

Retrieved February 28, 2024, from <https://www.undp.org/sustainable-development-goals>

White, M. P., Weeks, A., Hooper, T., Bleakley, L., Cracknell, D., Lovell, R., & Jefferson, R.

L. (2017). Marine wildlife as an important component of coastal visits: The role of perceived biodiversity and species behaviour. *Marine Policy*, 78, 80–89.

<https://doi.org/10.1016/j.marpol.2017.01.005>

XIII. Appendices

Appendix A

Interview Transcript Sailing Instructor

25 January, 2024

Can you introduce yourself and what you do?

Grassy Park, 23 years old. Started sailing 2015, at developing center during high school. Now working fulltime at little optimist.

“Myself and [other sailing instructor] we act as role models to kids that come from similar backgrounds to us.”

“Greg started this thing in 2016 and we got on board back then, and we were only doing the great optimist race, then two years later we jumped on board and now we are working here for two to three years.”

“The kids that we deal with are all from disadvantaged communities, and we try to deal with kids that would not be able to come to a program like this.”

“I’m passionate about what I do, and just to be able to have to opportunity to teach and to inspire kids that come from similar background than me, that is why I do what I do. So, it’s not about the money, it’s about teaching the kids, the opportunity is a bonus, and everything else is a bonus. If I didn’t enjoy what I’m doing here would have definitely not been here and by saying that I absolutely love what I’m doing, inspiring many kids that come from similar backgrounds to the ones that [other sailing instructor] and I come from and just to be able to do that brings joy to my heart and that’s why I’m at the little optimist sailing academy.”

What did sailing do for you personally?

“Lifechanging. That is the word I’m going to choose, lifechanging. Back then, we did not have opportunities like this. I did many sports, anything I could get my hands on I did. But I chose to do sailing and I never looked back. [Other sailing instructor] and myself started sailing on the same boat. We started competing and by doing that we went to different places and that was the one opportunity where we could experience something that was out of our area. It opened my eyes to what was out there in the world. In 2019 the yacht club hired myself and [other sailing instructor] and I got the opportunity to go to America. And why I say lifechanging is that opportunity right there. So, I’ve never been on a plane before, never

even got out of my own area, and to have that opportunity it was the first time ever in my life where I could experience something like that. And that there already was the highlight just being on that plane was the highlight of my life. And it all started by sailing.”

What did you do in the States? short answer: teaching sailing at a summer camp.

“I was a very insecure person. I didn’t like to socialize, but now with all these experiences, that’s why I say lifechanging for me. Because where I am right now compared to where I started, I’m much better not just financially but physically mentally and in all aspects of my life. To say in a nutshell, it brought me out of my shell if that makes sense.

***He talks about how sailing and the traveling etc. brought him out of his comfort zone and that in his area, people are closed off to what’s out there, they feel like this is where they must be for the rest of their life, and they are not open to the rest of the world.”

Do you have a role model?

***He talks about his father being his role model. His father passed away two years ago. He states that his father gave him advice and guidance. But he also states that everybody is his role model in the sense that he learns from everyone and can learn from everyone. He names Greg and [other sailing instructor] as exemplar role models. So, he states that he finds role models in everyone all the time. More on his father: His father was the glue of everything and everything, he looks like his father, so everyone cries when they see him. His mother is alone now, so him and his brothers must step up and that’s the burden that he feels.

***He talks about always being the naughty one in class back in the day and now he wants to “grow grow grow”.

Can you tell me a little bit more about Grassy Park?

“Grassy Park is a very nice quiet place. There are many nice places but also many dangerous places (*within Grassy Park*). We come from a development area within Grassy Park. I live with my single mother and younger brother.”

“For me and many people from these areas, we can’t afford to mess up. And that’s why you’ll see sometimes that I’m so stressed because I know in the back of my head, I can’t afford to mess up not even for once, for one moment, nothing. If I was today to not be here, I promise you tomorrow, if I wasn’t at this place right now, it’s not going to look good for me, because its tricky. I’ve fell and put myself back up but it’s hard in our area. There is no inspiration over there. There is nothing going on there that allows us to think like where we are right now. I promise you if anyone from the place that we come from comes here, they

would never want to leave this place ever. They would not want to go back to that place because its tough.”

What are some of the challenges?

“Opportunity. Schooling. A big factor is drugs and no inspiration. Even at schools, if you look at the private schools and our schools, we are not offered anything that gives us inspiration or opportunity. If I look at someone of the exact same age of me living next door with the same conditions except that they did not get this opportunity, you will see that they are struggling. Struggling to find a job, to support their family, to be inspired to do something. We are repeating the cycle, and nothing is changing in our areas.”

**He talks about how there is a massive inequality when it comes to quality of schooling and education system, and that the public schooling in poor areas is extremely bad, while private schooling is of quality. “This further keeps the structural knowledge and economic inequality intact. Who is teaching us? I am asking for opportunity to be taught.”

“For a coloured person, where we come from opportunity, schooling, easy life, and access to resources just isn’t possible”

**Talking about crime and gangsterism:

“We believe that gangsterism is the only path that we have, the only path that we can walk, the only path that is going to give us something different in life (*probs talking about extra financial means or opportunity*). My family, my family’s family, some of my friends, the family of my friends (*are in gangsterism*). It is so easy to be influenced by those around you. My father’s brother is still walking on the road today. If I look at my brothers, I know it could have been them. It could also have been me. It is so easy to be trapped in a position, there is no one that is telling them that there is a way out. They believe they are stuck. You are stuck in that place, and it is so hard to get out. Gangsterism and drugs is a massive problem.”

***Talking about mindset and how generally, there is a very pessimistic mindset, in which people don’t want to take initiative to make their life better because they are intimidated by the amount of work, they think it will cost. So, they go on with the way it is now because it is scary to take a leap.

***He talks about the little optimist: “when the children come here: nervous, when they leave here: happy.” We try to put our perspectives into what we teach and our experiences. It is about creating awareness. About where they are right now is not where they must stay, and we are examples of that, [other sailing instructor] and I are examples of what is possible. There is a way out for them. When they finish school, there is a place here for them to work.”

Appendix B

Informal Conversation Community Caretaker and Mentor

27 January, 2024

Informal conversation with community caretaker and mentor from Heideveld (Cape Flats), father of children participating in sailing therapy program from The Little Optimist.

Programs like the one of the little optimist have a big impact on these children's life, particularly because they get to leave their violent environment – they break a cycle of violence.

Also in our community, Heideveld, it is very violent with many gangs active. Particularly for youths from around 14 to 15 years old, there is a risk for entering gangs. These kids are ruthless and socially unaware, their morality is not yet fully developed, and this makes them particularly vulnerable.

Also, lots of teenage pregnancies, 17-18 years old is a very normal age for a girl to have a child.

It is necessary to take the children out of their environment to decrease the negative effects that their standard environment exposes them to. Best is for this to happen on a regular basis. For instance, how Lucrecia does this. She takes her group of girls dancing every Sunday after church, and tries to organize trips outside of the Cape Flats. This shows them there are other possibilities, which enhances self-esteem, confidence, and optimism – they start to believe they can achieve something.

Appendix C

Informal Conversation Erica Burger

20 January, 2024

The biggest challenge for women is rape , for men it is gangsterism. For instance, [the sailing instructors] would have had a bigger chance of entering a gang, than to end up doing their current work at the little optimist. Gangs come into the school where they pick their members out of the classrooms. These are kids from around 10 years old, mostly boys. That's why schools securitise their classrooms with gates at everydoor and window. With each person entering or leaving that classroom, the gate has to be opened and closed again.

There are notable differences in the sailing programs for the paid clients in comparison to the children that come for surfing therapy and are from marginalized areas. Clients are confident in their swimming, they had swimming lessons and are used to the water. However, for the children participating in our therapy sessions this is a different story. Where they grew up, they were never provided with swimming lessons and hence, they are afraid of the water. One can therefore see the change in a child's attitude before and after the sailing therapy: they are much more confident afterwards.

Appendix D

Interview Notes Nicole Klassen

23 January, 2024

Nicole Klassen does research and works in the family system constellation, which deals with the intergenerational trauma of colonialism and apartheid.

During colonialism, the indigenous communities of South Africa were hunted down, and the indigenous communities fled all over the country and distanced themselves from their culture to not be noticed and stand out as indigenous.

The people were displaced, and the language, land, medicine, heritage, etc. was erased.

In the indigenous culture, healing goes through indigenous knowledge.

In the past, the center of knowing was the Cape Matriarch. The Ausidi (Ausi)'s were / are women of the indigenous culture and they are the ones that hold the indigenous knowledge. But there are "other ways of knowing" that are indigenous, related to spiritual and the natural world.

For instance, water has memory, and remembers the stories and feelings that are shared with it. Every body of water holds different memories of everything and everyone that it has encountered but is possible to connect the waters and therefore the knowledge they hold. If you take a bit of water out of one body, for instance, a lake, and pour it in a different body of water, for instance, a river, this body of water will take over the knowledge and memories of the lake and will add that knowledge to its own. In that way, water shares its memories and knowledge interchangeably.

Nicole Klassen talks about how, within the indigenous community, it is believed that the ancestors hold and share the existing knowledge, and that the ancestors of humans is nature. Therefore, it is nature that knows, and nature that shares.

Nicole Klassen explains that the oldest existing form of medicine and therapy in South Africa, and probably in the world, is water therapy, but today, the Western world is so distanced from their roots and their ancestral ways that they now see blue care and blue therapy as something "new" and "contemporary". Meanwhile, the indigenous communities in South Africa have been using water therapy for centuries and are still using water therapy.

Nicole explains how water medicine and water ceremonies are used as therapeutical means for sexual trauma and victims of sexual violence. She also explains that water as medicine has the following medicinal properties:

- It puts down the nervous system vibration
- It induces connectedness with the natural world and others around you and induces a higher level of empathy.
- It creates and induces awareness about the bigger view in life and creates a sense of being part of something bigger.
- It is form of meditation. (A fast form)
- It induces a state of surrender and letting go. It creates a feeling of trust and safety in which it is safe to let go and surrender to nature and the bigger picture.

In addition, Nicole also speaks about the fact that, because of the intergenerational trauma that lies within the indigenous community due to their displacement and the erasure of their language, medicine, and culture, it is of extra importance for the indigenous communities to restore and reconnect with the ancestral knowledge and ways of medicine. Therefore, for the use of water therapy and connecting with water in general in their local environments is of extreme importance.

Aside from the cultural history and spirituality that surrounds water therapy and which creates and amplifies the importance for the use of water therapy in South Africa, Nicole also explains how, since there are close to no options for therapy or psychological help within the marginalized communities of South Africa, other means of improving mental well-being which are free and accessible, like bodies of water, are of great importance.

Appendix E

Interview Notes Vuyisa Qabaka

12 January, 2024

There are different townships around Cape Town, with all different communities and their own challenges in them. However, they all face a lack of dignity.

What you see is that many programs (like the LO) become escapism: fleeing out of your town to do something fun. Therefore, it is important that children participate for a longer time in such programs. At first it is only escapism, afterwards they can develop a sense of true passion etc.

There is a lot of talent in South Africa, but no structures to develop these and give people a place or a opportunity to. Exposure can only over time lead to value and value propositions.

However, we should take into account that there are many hurdles, such as transport. But even electricity, abusive parents, no clothes to wear, etc. can lead to people not being able to come and participate in a program. Also, take into account that they could have responsibilities at home for which they need to be back in time, like taking care of siblings, etc.

Therefore, there is a great need to map other elements in the ecosystem influencing the effectivity of the program to form a holistic understanding of it. The LO is only a small part of the entire lives of the children, and thus how to structure a program has to take the other element into account.

Nyanga, don't go! Everywhere else quite okay

We could also take the possibility to go talk to the embassy in South Africa, Vuyisa could give us their contacts. They are involved with platforms for change makers and could be interested in our project and even help the LO in the future (a nice connection to create for LO). Vuyisa could also give us the contact information of Russel Wolmer, who sailed SA to Rio several times, to ask him if he would like to become involved in the project because he knows the sailing-yacht community.

The best way to evaluate the program of the LO, according to Vuyisa, is to look at three components:

1. Their product: is it clear enough, not only what they do, but what the outcome of it is, what are they exactly selling
2. Their costumers: that are the beneficiaries, but also the kids etc. Clear image is necessary
3. The distribution: connect costumer and product in a good way: value proposition.

For the first one, we should talk to Greg about his *theory of change*, which holds the philosophy behind the program: how exactly is Greg planning to better the lives of the children with sailing in particular? If we can internalize that theory/philosophy to our own lives, it would also be easier for us to “sell it” to beneficiaries, since they are closer to our “daily-life” than to South African daily life.

Plus, clear numbers are way more efficient in selling a product than only the story of the theory of change. Therefore, we must also get an empirical view on the LO, by getting those numbers and using them in the story that we’re using to get fundings.

Beautiful thing about Africa: its humanness: “when people don’t have anything, the only thing that they can give to you is a part of their heart.”