

# Solidarity in Anti-GBV Praxis: Positing a Schelerian/ Frommian Conception of Solidarity Against GBV

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**Abstract:** This paper posits a new approach to solidarity against GBV, drawing from phenomenology and critical theory. Pumla Dineo Gqola proposes that directly interfering in acts of gender-based violence (GBV) is necessary to stem the tide of GBV. I argue that a particular type of solidarity is needed for this mode of praxis, termed direct interference, to be effective. This type of solidarity can be found in the works of phenomenologist Max Scheler and critical theorist Erich Fromm, who both argue that true solidarity can only occur when individuals recognise each other and themselves as individuals, while also recognising their shared group identity. True solidarity involves not only a responsibility towards the group, but also self-responsibility and mutual responsibility with other individuals in that group. It is this kind of solidarity which is needed if direct interference is to live up to its potential as an effective mode of praxis against GBV. This is because such a mode of solidarity fosters the recognition of other's individuality and responsibility towards each other as individuals, while recognising that there is a shared group of women and other potential victims of GBV, who share a co-experience of the threat of GBV.

**Keywords:** Fromm, GBV, Gqola, Scheler, solidarity.

## I. Introduction

Solidarity against gender-based violence (hereafter GBV) is a strange thing. It is generally taken for granted that solidarity is necessary if any anti-GBV action is to be successful and solidarity is often called for in anti-GBV campaigns. However, what is meant by 'solidarity,' against GBV or otherwise, in such calls and conversations is rarely defined. Perhaps it is assumed that everyone agrees that solidarity is, as according to the Cambridge Dictionary (2025), "agreement between and support for the members of a group," (in this case the group being victims and possible victims of GBV) and that, as according to the Collins Dictionary (2025), "If a group of people show solidarity, they show support for each other or for another group, especially in political or international affairs."

Maybe it is taken for granted that solidarity against GBV simply involves showing support for victims and possible victims of GBV. This often involves believing victims stories, setting up safe houses, calling for the conviction of rapists, and holding marches. However, this is largely action directed at those who have already experienced GBV, and while this is laudable and important, it does little to prevent GBV itself. I argue that Pumla Dineo Gqola's proposal that we

should directly interfere in instances of GBV and disrupt the functioning of what she calls the Female Fear Factory should be taken seriously as a mode of praxis employed to combat GBV. This mode of praxis does not only address the aftermath of GBV but works to prevent it at the source. However, it is also a mode of praxis which relies on solidarity, especially between women but also between people in general, if it is to effectively dismantle the conditions which allow for the perpetuation of GBV. But what is meant by “solidarity” and how this solidarity is to be achieved is undefined and little discussed, both by Gqola and by anti-GBV activists in general. As I will show when providing an overview of direct interference, simple ‘support’ is not enough. A different kind of solidarity is needed.

In this paper, I argue that the kind of solidarity needed in order for Gqola’s direct interference to be effective is the kind put forward by the phenomenologist Max Scheler and critical theorist Erich Fromm. This is a solidarity in which individuals recognise themselves and others as individuals, feel co-responsible for each other, and are able to work towards a common aim. It is this kind of solidarity, only possible in the social unit which Scheler calls the collective person, which is needed if direct interference is to live up to its potential as an effective mode of praxis against GBV. This paper thus posits a new approach to solidarity against GBV, drawing from phenomenology and critical theory. This mode of solidarity, I argue, is better suited to facilitating direct interference as effective praxis against GBV.

Gqola writes from a South African context, South Africa often being dubbed ‘the rape capital of the world,’ with particularly high rates of GBV (Govender 2023). However, GBV is not unique to South Africa and other low- and middle-income countries or to countries known for high levels of gender inequality. GBV is also prevalent in high income countries (the famous cases of Gisèle Pelicot in France, Sarah Everard in the United Kingdom, and Gabby Petito in the United States of America are just some examples of cases of GBV which garnered publicity). So, while Gqola writes from a South African perspective, direct interference is not a mode of praxis specific to South Africa. Rather, it, and the argument made in this paper, are relevant in any context in which GBV is prevalent.

I begin with an overview of Gqola’s argument for direct interference in instances of GBV, directly interfering in the workings of the Female Fear Factory, the systemic production of female fear, by removing the conditions which allow for this. I will also argue that solidarity is a key requirement for such a mode of praxis against GBV. I next discuss Scheler’s concept of co-feeling and how it relates to different social units, the highest form of which is the collective person, wherein true solidarity is possible. I then discuss Fromm’s understanding of solidarity, arguing that it is similar to and compatible with Scheler’s understanding. I will then summarise what true solidarity, in the Schelerian/Frommian sense, is, and argue that Scheler and Fromm provide the necessary conditions which need to be met if genuine solidarity is to occur. Namely, this is a solidarity in which one knows

oneself as part of a collective with joint aims, issues, and experiences, while recognising oneself and others as unique individuals, in order to truly feel solidarity with individuals as individuals, while also having the political aim of developing strategies to combat their shared issues and enact their shared aims. I conclude by arguing that it is this kind of solidarity which is necessary for direct interference as a mode of anti-GBV praxis to be successful, as it fosters mutual- and self-responsibility as well as responsibility for the group as a whole, and thus encourages action that benefits others, the group, and oneself.

## **II. Pumla Dineo Gqola, the Female Fear Factory, and Direct Interference**

Gqola (2015; 2021) argues that GBV is an expression of patriarchal<sup>1</sup> violence, a tool used to sustain female fear and subordination, and that the pervasiveness of GBV is due to this tool being implemented to maintain patriarchal control. Fear is, according to Gqola (2021, 113), “an excellent way to keep people under control because it forces us to police ourselves” in the (false) hope that doing so will keep us safe. The production of female fear in order to force submission is “repeatedly manufactured through various means in many private and public settings” and is vital for the continuation of patriarchal control (Gqola 2015, 79-80; Gqola 2021). Female fear is mass-produced in such a systematic, efficient manner that Gqola calls the production of female fear, and the conditions which enable its production, the Female Fear Factory.

The Female Fear Factory is thus the public, theatrical and spectacular performance of ‘patriarchal policing and violence’ towards women and other groups, such as transgender individuals and certain men who are cast as female and therefore deemed safe to violate (Gqola 2015; 2021). It is normalised by frequent performances, with viewers becoming desensitised to it, expecting to see it play out and not expecting its interruption (Gqola 2015). Participants in the Female Fear Factory follow scripts provided to them in the hope that they will be protected from GBV, involving self-policing and conducting oneself in specified ways (Gqola 2021). For example, women are told to dress respectably, to not go out alone after dark, to ensure that they aren’t dependent on a man, to get out of a dangerous relationship early, to learn self-defence or go to the police for help, and that, if they do these things, they will be safe (Gqola 2021). Furthermore, to be passive and allow the performance of the Female Fear Factory is the safest course of action (Gqola 2021). Those who reject the script, interfere with the Female Fear Factory, or wish to dismantle it are vilified, blamed, and punished. The scripts women follow allow for the continued functioning of the Female Fear Factory by encouraging women to be fearful and passive, and as such not pose a threat to the Female Fear Factory and the patriarchal domination it perpetuates.

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<sup>1</sup> Patriarchy, in this context, refers to a social system which grants and perpetuates male power and domination, and therefore female submission (socially, politically, and sexually).

The continued efficient functioning of the Female Fear Factory also requires that the aggressor, the man causing the fear, be safe from repercussions (Gqola 2015). Perpetrators of GBV are rarely prosecuted and punished,<sup>2</sup> and very often don't even receive adverse reactions from ordinary people (Gqola 2021). The normalisation of female fear makes being a perpetrator of it easy. The vulnerability of the target, the woman or feminised individual, is also a requirement for the efficient functioning of the Female Fear Factory (Gqola 2015). The audience's reluctance to interrupt the Female Fear Factory's performance contributes to this vulnerability, leaving the target on her own. The third condition is that the aggressor needs to be able to communicate to the target that he has power over her, that she is vulnerable, and that he won't face repercussions (Gqola 2015). The audience's allowance for the continuation of the performance is thus vital for the functioning of the Female Fear Factory, because it is the audience's allowance for the act of GBV to take place and its reluctance to condemn the aggressor and push for repercussions which allows the aggressor to be confident that he has power over his target and is safe from consequences.

Gqola (2021) describes an example of an interruption of the Female Fear Factory in a short story that she wrote earlier in her career and recounts in her book *Female Fear Factory*. She tells the story of a woman and her male partner who travel in a train carriage, which they share with a range of people, including workers, schoolchildren, and a group of young men. The men expect to be uninterrupted in their display of masculinity and their harassment of the schoolgirls, but are taken aback and retreat when their behaviour is challenged. Gqola (2015) describes another example, this time an experience of a feminist named Lebo Pule, who witnesses a man harassing a young woman in a shop. While the young woman clearly does not like the attention and tries to safely reject and escape the man, he is persistent, and none of the other customers come to her aid. When Pule intervenes and questions his behaviour until he retreats, it is this which surprises the other customers. In both cases, the men are no longer safe from repercussions, and the women are not left vulnerable; hence, the message of the men's power and immunity cannot be effectively conveyed. The necessary conditions for the effective functioning of the Female Fear Factory are removed.

The Female Fear Factory has been normalised to the point that intervention is unexpected. But it is exactly such an intervention which is needed to dismantle

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<sup>2</sup> For example, in South Africa, in the third quarter of 2023 (1 October to 31 December), 12 211 rape cases were reported (Mosaic 2025). Only 4 783 suspects were arrested for GBV related crimes (Cele 2024). Of those arrested, 89 were given life sentences, 64 sentenced to twenty years imprisonment or more, 172 were sentenced to ten to nineteen years imprisonment, and 261 were sentenced to one to nine years imprisonment (Cele 2024). In short, of 12 211 rape cases reported (note that this is rape cases in particular, rather than GBV cases in general), 4 783 arrests were made (39.1% of 12 211). Of this number, only 586 were sentenced (12.3% of 4 783, and only 4.7% of 12 211). However, many women do not report that they have been raped, so that actual difference between the number of aggressors sentenced versus the number of acts of GBV which actually occur is likely to be greater.

it and to put an end to the use of GBV as a tool of the patriarchy. Interference with the Female Fear Factory must be constant and consistent because continuous defiance of the Female Fear Factory, according to Gqola (2021), is the only way to dismantle it. Defying the Female Fear Factory involves unlearning the scripts that we have been taught to follow and unlearning the socialisation that has made us believe that harmful and fear-causing attitudes and behaviours are normal (Gqola 2021). Feminism is, according to Gqola (2021, 27), “the constant refusal to be held down,” this fight against feminine subjugation as a result of the Female Fear Factory. It is about wearing patriarchy out through constant defiance, and feminist commitment involves repeated strategic interference in and concerted efforts to disrupt the Female Fear Factory, which will, over time, lead to its collapse (Gqola 2021). This commitment is a lifelong one for feminists, Gqola claims, and holds not only for South African feminists, but also for feminists internationally.

Practically, this involves a call to name and identify rapists, to break the silence around who they are, and do away with the notion that they are outliers from the norm (Gqola 2021). But Gqola also calls for repercussions that go beyond the legal system, which relies on perpetrators first being identified. Some, such as Bashonga and Khuzwayo (2017), argue that it is important to cultivate new forms of masculinity by educating men and boys on the wrongs of GBV. Gqola (2015), however, argues that educating men about the harm and prevalence of GBV is not the solution. Men are aware of the Female Fear Factory, which operates publicly and pervades all of society (Gqola 2015; 2021). Men who are not perpetrators of GBV have undoubtedly witnessed the Female Fear Factory at work and have been part of the audience. If they have not chosen to intervene, they have chosen to remain passive. They do not need education about the prevalence of GBV because they are witnesses to it. Education, then, is not the answer to eradicating GBV (Gqola 2015).

Gqola (2015; 2021) describes how we can interrupt the Female Fear Factory and thus work against GBV by refusing to be passive, both as victims and as the audience. Notably, the audience’s passivity and reluctance to interfere is what allows the continuation of the Female Fear Factory because their passivity enables the perpetrator to not face repercussions, for the victim to be vulnerable, and for the perpetrator to communicate this power dynamic to his victim. Intervention on the part of the audience strips away the necessary conditions for the efficient functioning of the Female Fear Factory and chips away at the normalization of female fear, and the toleration of GBV.

In short, direct interference as a mode of praxis against GBV involves individuals interrupting instances of GBV, thereby both protecting the victim as well as condemning and problematising the normalization of GBV and the attitudes that facilitate its perpetuation. However, direct interference can only be successful in combatting GBV if enacted collectively on a mass scale. Individual acts of interference on their own hold little hope of disrupting the Female Fear Factory enough to dismantle it. Interference must occur frequently and

consistently, becoming part of the daily lives and social interactions of the general public, both men and women. As Thoreau (2015) argues, many acts of individual disobedience are capable of clogging a system because of the sheer volume of disobedience taking place. Likewise, systemic and consistent interference with the performance of the Female Fear Factory, the constant removal of the necessary conditions for its functioning, and the refusal to accept its normalization will eventually prevent its functioning entirely and lead to its dismantling.

Direct interference as a mode of praxis against GBV should be taken seriously. While many modes of social praxis are employed against GBV, such as marches, protests, the funding and running of safe houses and helplines, or social media campaigns, these modes of praxis tend to address the aftermath of GBV. They either centre around a particular victim as a signifier for all victims, or they aim to help victims of GBV. Or they decry the wrongs of GBV generally, appealing to governments to act in stemming the tide against GBV. However, in the first case it is the victims of GBV who are the focus of such action. As Gqola notes, all women and feminised individuals are impacted by the Female Fear Factory and the threat of GBV. If one is a woman or feminised individual, one is already a potential or even a pre-victim of GBV. However, action focused on the aftermath of GBV, on those who are already victims, does nothing to prevent this potentiality from becoming reality. And, in the second case, the appeal to governments to do more to combat GBV is unlikely to be effective because GBV is a social, rather than a legal or political, issue. GBV occurs despite being illegal, and despite being condemned by governments, and continues to occur despite illegality and condemnation because it occurs at a socio-cultural level.

Direct interference, on the other hand, can do more to prevent potential victims of GBV from becoming victims, as it targets instances of GBV before they occur. Direct interference strips away the conditions necessary for GBV to be enacted, and thus, the more direct interference is implemented, the more GBV is prevented. This is, however, not to say that the modes of praxis which deal with the aftermath of GBV are unnecessary. Rather, it is to say that they are palliative rather than a solution, and should occur in conjunction with direct interference, as it seeks to undercut the occurrence of GBV through direct interference in the workings of the Female Fear Factory.

Interference in the Female Fear Factory would occur on an individual level, across many individuals, and must be encouraged as a way of life rather than as part of an organized campaign. Individuals would support other individuals through the continued interruption and interference with the Female Fear Factory, and thus through shows of solidarity with each other. While it is true that, as Gqola (2015) argues, there is no need to educate men (and women) about the prevalence and dangers of GBV, there is a need to present and encourage the idea of interference in performances of the Female Fear Factory. The prospect of interfering is daunting, as it is discouraged through the threat of violence, and conscientization is needed for individuals to be willing to adopt such a feminist

praxis. The myth that female fear is normal needs to be exposed as such and there is a need to emphasize and encourage solidarity as a form of protection against retaliation and punishment for interference.

In light of this, solidarity is central to direct interference as a mode of praxis against GBV. Individuals need to feel solidarity with each other in order to recognise the need to interfere in cases of GBV, and to be willing to do so despite the risk to themselves. This solidarity goes beyond support for a group, because it requires supporting individuals as individuals while recognising that they are also members of a particular group, in this case possible victims of GBV. This is, moreover, an amorphous group, as everyone, even cis-gender men, can be victims of GBV (although women are typically considered to make up the majority of victims and Gqola certainly focuses on a female, or feminised, victim). It is hard to show support for a group, as a *group*, when it is so vaguely defined. It is far easier to show solidarity with the defined group of GBV victims, but, as I've already stated, this does nothing to prevent GBV. Moreover, solidarity with a group does not ensure a responsibility to the individuals within that group.

In short, if solidarity is to be engendered in order to encourage systematic and collective direct interference in cases of GBV, thus dismantling the Female Fear Factory, this solidarity has to involve solidarity between individuals as *individuals*. It requires recognising the other as a potential victim in a case of GBV and wanting to protect *her*. It also involves one, as an individual, feeling responsibility for another individual. However, this solidarity is engendered through social relations and through the recognition of each other as part of a shared social unit. I will now discuss Max Scheler and Erich Fromm's theories of solidarity, as I argue that it is their conceptions of solidarity which are best suited to facilitating the kind of social relations we need to have with each other in order to develop and enact direct interference as a mode of praxis against GBV.

### III. Max Scheler, Solidarity, and the Collective Person

The phenomenologist Max Scheler argues that true solidarity can only exist within the social unit of the collective person. However, to understand why this is so one first needs to be familiar with Scheler's four categories of fellow feeling, as put forward in his work *The Nature of Sympathy*, and how they relate to the four social units (the mass, the life-community, society, and the collective person), as discussed in *Formalism in Ethics and Non-Formal Ethics of Values* (1973).

Scheler argues that individual human beings can share in emotional experiences. In *The Nature of Sympathy* ([1923] 2017), Scheler distinguishes three forms of sociality, or togetherness (Salice 2016). The most basic of these forms of sociality, at the bottom of the ontological ladder, is emotional unification or identification, or *Einsfühlung*, in which we share in the emotion of an Other, without recognising the other's individuality or that the emotion did not originate within us. In true emotional identification we involuntarily identify ourselves with an Other, for example, through hypnosis (Salice 2016; Scheler 2017). A less

extreme version of emotional identification is emotional contagion/infection, in which emotions are involuntarily and unconsciously transferred to us. This occurs through the unconscious imitation of other's expressions, such that their emotion is reproduced in us without our having undergone emotional experience ourselves. Scheler provides an example of how a cheerful atmosphere at a pub or party may 'infect' those who enter into it, such that they too start to feel cheerful. Likewise, we can 'catch' someone's sadness and start to cry ourselves. In neither case has the 'infected' person undergone emotional experience – they have nothing to be cheerful or sad about. However, the emotionally 'infected' individual does not recognise that the emotion is not genuinely theirs (Schloßberger 2020) and believes themselves to be the origin of the emotion (Salice 2016). There is, therefore a lack of recognition of the individuality of the other, as this form of sociality precedes consciousness of the other as an Other (Schloßberger 2016).

The second form of sociality is empathy (Salice 2016), sensing (Schloßberger 2016), or *Nachfühlen*. In this case one 'vicariously' (Salice 2016) feels what the other is feeling, without being under the illusion that this emotion is one's own. Instead, when empathising we sense the other's emotion, through the conveyance of it through their expression, and relate to it, all the while recognising that it is *their* feeling (Salice 2016; Schloßberger 2016). We might feel empathy and compassion for another's suffering, but we are only able to do so insofar as we remain separate from the other, recognising their suffering as theirs alone (Schloßberger 2020). This is fellow-feeling about something (Scheler 2017). I commiserate with the other's sorrow, feel compassion for their suffering, joyful about their success, and my feeling is a reaction to their emotional experience (Scheler 2017).

The third and highest form of sociality is community of feeling, or feeling-with-one-another (*Miteinanderfühlen*). When explaining this form of sociality, Scheler provides an example of two parents at the grave of their child. They mourn their child together, such that there is "one single mental fact is that is occurring" (Salice 2016, 280). In other words, their sorrow and grief are identical (Scheler 2017; Schloßberger 2016). Unlike in *Nachfühlen*, one parent's grief is not an object that the other reacts to and commiserates with. And, unlike in *Einsfühlung*, both parents have undergone emotional experience leading to the same feeling, rather than one having unconsciously been infected by the other's grief. They feel this emotion as a feeling-in-common (Scheler 2017, 13).

In *Formalism in Ethics and Non-Formal Ethics of Values* ([1913/1916] 1973), Scheler discusses four kinds of social units, which also fit into a hierarchy, and to which the three forms of sociality of feeling correspond. It is in the highest form of social unit, the collective person, that true solidarity can be found.

The first and most primitive social unit is the mass. The mass is characterized by emotional contagion and the imitation of the other's emotions, as well as their beliefs and behaviours (Salice 2016). Remembering that, in emotional contagion, one does not recognise the individuality of the other, or that

the emotions (or beliefs or behaviour) with which one is 'infected' are not originally one's own, there is therefore no recognition of what one has in common with the other, and there is thus no responsibility between the members of the mass (Salice 2016). There can be no solidarity within the mass, as Scheler believes that shared responsibility for each other and the social unit is a prerequisite for solidarity (Salice 2016).

The second form of social unit is the life-community, which involves a kind of co-experiencing (including co-feeling, -striving, -thinking, etc.) the mass does not (Scheler 2017). The life-community exhibits collective intentionality, as a communal 'we' (Salice 2016). However, there is still no recognition of individuality, as there is no division between the experience of the self and that of the other. The life-community exhibits *Miteinanderfühlen*, feeling-with-one-another, in that the members exhibit identical co-feeling (and co-experiencing, etc.). However, in this co-feeling they do not recognise each other as individuals and only feel responsibility towards and solidarity with other members of the life-community insofar as they are members of that community (Salice 2016). This is solidarity with and responsibility towards the life-community, rather than the individuals which compose it. Scheler (1973, 527) calls this "*representable solidarity*," as it is solidarity towards representatives of the life-community. Self-responsibility is thus built on a co-responsibility towards the community. As will be shown when discussing the collective person, there is no true solidarity within the life-community. A form of emotional identification also takes place in the life-community, as the individual identifies themselves with the group (the life-community), without recognising oneself as an individual amongst other individuals (Salice 2016). The individual is engulfed by the collective (Salice 2016). This feature of the life-community too will be revisited when considering the collective person.

The third form of social unit is the society, involving individuals living-together due to specific conscious acts as decided by each individual. Within the society, each individual recognises others as individuals with whom they can form contracts in order to pursue personal interests. There is no co-experiencing or co-feeling, and emotional relations are governed by *Nachfühlen*, through sensing the other's emotion while seeing it as an object to which one responds (Salice 2016). As each member pursues individual interests, there is also no collective responsibility or solidarity. Each member of a society considers themselves (and so feels self-responsibility), and their own interests, and there is therefore distrust between the members.

Finally, the fourth and highest form of social unity is the collective person. The collective person, like the life-community, is also characterised by *Miteinanderfühlen*, by co-experiencing and co-feeling. Yet in the collective person, unlike in the life-community, the individual understands themselves, and others, as individuals. Collective persons are, according to Salice (2016), communities in which there is co-experiencing and co-feeling and yet whose members conceive of

themselves as individuals and are able to recognise that they are the owner of the experience or feeling they are undergoing. The members of the collective person are aware of which mental states are wholly their own, and which are collective mental states of which they are co-owners. The collective person thus exhibits the solidarity and collective unity of the life-community, while still involving the society's recognition of the independent individual person.

Hence, members of the collective person are simultaneously individual persons and members of the collective person. Unlike the life-community, wherein the community is the bearer of all responsibility and individuals are co-responsible for the life-community, the members of the collective person are both responsible for themselves and at the same time co-responsible for the collective person and every individual member in it. Likewise, the collective person is co-responsible for its members (Scheler 1973). Thus, within the collective person there is both mutual co-responsibility and self-responsibility. Due to this mutual responsibility, Scheler argues that the representable solidarity of the life-community, in which there is only solidarity between members in so far as they represent the life-community, becomes an unrepresentable solidarity. Solidarity now exists between individuals not simply as representatives of a life-community, but as unique individuals. It is a solidarity between individuals themselves. To quote Salice (2016, 287), "I care about the other not only [...] to the extent that that his or her actions are contributions to the life of the community," but "because the entirety of his or her actions matters to me."

In short, co-feeling and co-experiencing, *Miteinanderfühlen*, is necessary for solidarity in any form, be it representable or unrepresentable. One needs to know oneself as part of a collective with joint aims and experiences, rather than an individual with solo aims, in order to feel solidarity with others. However, one also needs to recognise oneself and others as unique individuals, and to be able to recognise which of our feelings and experiences are our own and which we are co-owners of, in order to truly feel solidarity with individuals as individuals. True solidarity therefore involves both the recognition that we are all members of a collective with shared feelings and experiences, and also distinct and unique members of that collective. I will show how this understanding of solidarity is the kind of solidarity needed in order for direct interference to be effective, but will first very briefly explore Erich Fromm's conception of solidarity.

#### **IV. Erich Fromm, Solidarity, and Love**

Much like Scheler, critical theorist and psychoanalyst Erich Fromm also places a great emphasis on the importance and value of solidarity, such that it is a recurrent theme in his work (Wilde 2004).<sup>3</sup> According to Fromm, solidarity is the

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<sup>3</sup> It is beyond the scope of this paper to provide a full analysis of Fromm's views on solidarity across his works. For a more comprehensive account, see Lawrence Wilde's *Erich Fromm and the Quest for Solidarity* (2004).

“prerequisite for the full mental well-being of the individual as well as for the fulfilment of a peaceful and productive world,” (Wilde 2004, 3) and, similarly to Scheler, the “one truly social orientation.” (Fromm [1955] 2008, 318) Fromm argues that, under capitalism, solidarity has broken down and given way to competition and individualism, and new forms of exploitation (Fromm [1941] 1965a; Fromm 2008; Ingleby 2008). Therefore, solidarity is necessary if we are to escape alienation, achieve fulfilment, and feel love for ourselves and others, for “[l]ove is the experience of human solidarity with our fellow creatures.” (Fromm 2008, 30)

Nevertheless, Fromm also recognises the importance of individuality within solidarity, claiming that “[i]n the act of loving, I am one with All, and yet I am myself, a unique, separate, limited, mortal human being.” (Fromm 2008, 30-31) He “[sees] no contradiction between the uniqueness of the self and the realization of solidarity” (Wilde 2004, 4) and believed that “individual identity is [...] an essential characteristic of man.” (Ingleby 2008, xxix) Fromm (2008, 56-57) is concerned that “[t]he average man today obtains his sense of identity from his belonging to a nation, rather than from his being a ‘son of man’” and thus that “he does not experience himself nor his fellow man in their – and his own – human reality.” Instead, what results is group narcissism, which Fromm in particular identifies in nationalism (Fromm [1964] 1971; Wilde 2004). And so, like Scheler, Fromm also argues that true solidarity is not possible insofar as one’s individuality is subsumed by the group.

Fromm too sees in solidarity a condition in which human beings become conscious of a shared fate (a co-experience). This solidarity makes possible the cooperation required to build the social structures necessary for human beings “to develop peacefully and harmoniously their uniquely human qualities of reason, productiveness, and love.” (Wilde 2004, 4) The development of solidarity between human beings is hence necessary for human flourishing, and a ‘sane society’ is one which “furthers human solidarity and not only permits, but stimulates, its members to relate themselves to each other lovingly.” (Fromm 2008, 269)

Fromm argues that equality, and therefore solidarity, requires difference that is celebrated rather than subjected to relations of superiority and inferiority (Wilde 2004), for “[w]hat the concept of equality does not mean is that all men are alike.” (Fromm 1965a, 291) According to Fromm, solidarity can only exist when there is “a positive recognition of the multitude of differences that inform an individual’s identity in a particular group yearning for a common ideal.” (Cawood 2019, 168) Solidarity requires the recognition of one’s own and other’s individuality, as it is only then that equality, and ultimately freedom, can be achieved (Fromm 2008; Wilde 2004). It is only through gaining “a sense of self by experiencing [ourselves] as the subject of [our own] powers rather than by conformity” that we can envision a “society in which man relates to man lovingly,” a society in which we are “rooted in bonds of brotherliness and solidarity.” (Fromm 2008, 353-354)

Fromm (1965a; 2008) considers the political possibilities brought about by solidarity, such as its role within socialism and noting that solidarity between individuals who have shared experiences (i.e. of discrimination or exploitation) can lead to strategies and ultimately being developed to highlight or combat these issues (Wilde 2004). Fromm's acknowledgement of the political possibilities inherent in solidarity diverges from Scheler, who paid more attention to the collective person as a nation or cultural unit (but not a state, and remote from politics, which belong to the realm of the society) and the collective person of the church. This divergence is simply a reflection of divergent preoccupations. Fromm was interested in the quest for solidarity and freedom within a world of encroaching and dominating fascism and barbarity in the years leading up to, during and soon after World War II, as well as by a deep suspicion and condemnation of nationalism (Wilde 2004). On the other hand, Scheler's thinking was influenced by German nationalism in the years leading up to and during World War I (Schmid 2015).

Nevertheless, their understandings of solidarity are strikingly similar.<sup>4</sup> Scheler and Fromm both place great import in solidarity, Scheler locating it in the highest form of social unity and Fromm identifying it as necessary for human freedom and flourishing. Moreover, both Scheler and Fromm believe that true solidarity can only be achieved between individuals who recognise themselves and each other as distinct individuals, and yet also recognise their shared aims and experiences (their co-experiences, although in Scheler's case this extends to co-feeling as well) rather than in the social unit of the Schelerian life-community, where one identifies with the group and feels solidarity with and responsibility for the group rather than with the individuals who compose it. Fromm's solidarity is thus the kind found in the Schelerian collective person, with more attention paid to its political value and its role in human freedom, fulfilment, and the escape from alienation. This is the kind of solidarity which, as I will show, is needed between women, and human beings in general, in order for direct interference to be employed as a mode of praxis against GBV.

## **V. Solidarity, According to Scheler and Fromm**

Before arguing that a Schelerian/Frommian mode of solidarity be adopted in order for direct inference to be enacted as a mode of praxis against GBV, I will first lay out what exactly a Schelerian/Frommian solidarity entails. Due to the similarities between their accounts, this account of solidarity is less of a synthesis than one mode of solidarity with a focus on different features and aims.

Both Scheler and Fromm conceive of true solidarity as necessarily existing between individuals who are not subsumed by a group or community, but who,

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<sup>4</sup> A more extensive critical comparison of the similarities in Scheler and Fromm's concepts of solidarities, while unfortunately beyond the scope of this paper, poses an interesting opportunity for further research.

while belonging to a community and identifying with that community, nevertheless recognise their own and other's individuality. It is only then that what Scheler (1973, 534) calls unrepresentable solidarity arises, as solidarity between individuals insofar as they are individuals, with their own projects and identities, rather than solidarity with individuals insofar as they are merely representatives of a group to which one also belongs. Mutual co-responsibility (responsibility towards each other and the protecting of their projects) and self-responsibility (responsibility towards ourselves and our own projects) is thus possible. The social group in which such a mode of solidarity and responsibility occurs is in the Schelerian collective person.

Within the collective person, co-experiencing occurs, and members may share identical or similar experiences, recognising that they share this experience with a group of others while also recognising that they (and others) experience this as individuals, rather than only as a member of the group. For example, members of a racially marginalised group may share a co-experience of oppression and discrimination, recognising that they experience this as a member of a group, alongside other members of that group, but also as individuals who are oppressed and discriminated against and are impacted individually. Feeling-with-one-another, *Miteinanderfühlen*, also occurs, in that members of the collective person can experience the same emotional experience (a co-experience) and thus the same emotion. However, in this co-feeling, individuals recognise that they, as individuals, have experienced this emotional experience, and that the emotion originates in them (rather than in the group at large), and that this is the case even though it is a co-feeling with other individuals who share in this experience and feeling.

The validity and importance of one's own and others' experiences and feelings can thus be acknowledged and valued, and shared experiences and feelings recognised, allowing for a sense of solidarity between individuals within a group characterised by co-feeling and -experiencing. There is no being subsumed by a group identity (such as in the mass or life-community, and as Fromm identifies in nationalism), but also no competitive individualism (as within the society, and which Fromm argues arises as a result of capitalism). There is a recognition of individuality within communality, of one's membership to a group as an important facet of their identity, but not their whole identity. To again quote Fromm (2008, 30-31), one is "one with All, and yet [oneself], a unique, separate, limited, mortal human being."

It is once this balance between individuality and communality has been achieved that true solidarity, as Frommian love for each other, is possible. It is also then that, as Fromm notes, strategies can be developed to address shared issues and co-experiences (i.e. of oppression) and co-feelings (i.e. shame, anger, fear, sadness, due to a shared oppression). If these strategies are to be successful, they need to be developed in a mode of true solidarity with one another, as they cannot be enacted purely on a group or individual level, but require a recognition of the

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way in which individuals can collectively act to work against a shared experience which impacts each individual in ways that are similar and yet uniquely experienced. Responsibility to the group is not enough to develop and deploy effective strategies against shared issues. Self- and mutual-responsibility are vital. One is not only deploying these strategies in order to benefit the group, or in order to benefit oneself, but to benefit those individuals which make up the group, including oneself.

It is true solidarity, in the Schelerian/Frommian sense, in which individuals feel solidarity with each other as individuals who belong to the same group and thus share experiences and feeling-with-one-another, which is needed if a strategy of direct interference is to be effectively deployed as a mode of praxis against GBV, as I will now argue.

## **VI. Solidarity In and For Direct Interference**

It was noted in the Introduction that solidarity against GBV is often taken to be solidarity with victims, as a group. One is thus solidary with victims insofar as they are representatives of this group – a case of representable solidarity. Moreover, as I also mentioned, such a form of solidarity, although important for dealing with the aftermath of GBV, does little to actually prevent its occurrence. This is because it does not involve solidarity with the pre-victims, that ambiguous, amorphous, and potentially all-encompassing group which includes anyone and everyone who could potentially be subjected to GBV. It is the pre-victims, the possible victims, which direct interference focuses on protecting.

I argued that Gqola's proposed mode of praxis against GBV, through directly interfering in acts of GBV and thereby disrupting the Female Fear Factory by removing the necessary conditions of its functioning (the audience's silence, the victim's vulnerability and the perpetrators invulnerability), should be taken seriously as a mode of praxis against GBV. It should thus be implemented alongside existing strategies and modes of action because these existing strategies and praxes target the aftermath of acts of GBV, by aiding and centring around victims, or attempt to address GBV by appealing to governmental action, but do not actively prevent the occurrence of GBV by destabilising the socio-cultural conditions which facilitate its perpetuation. Direct interference, on the other hand, does destabilise these conditions by disrupting the workings of the Female Fear Factory and by removing the all-important factor of the audience's passivity. Direct interference is thus action directed towards ensuring that the potentiality of becoming a victim of GBV is not fulfilled.

In order to be successful beyond simply preventing a few cases of GBV here and there, direct interference needs to be enacted collectively, systemically, and on a mass scale. While a few individual cases of direct interference will certainly benefit the potential victim in that particular case, they will not clog the Female Fear Factory enough to disrupt it. However, on a mass scale direct interference illustrates a collective cessation of the tolerating of GBV, a collective decision to

work against it, and a refusal to normalise it. Therefore, on a mass scale, as a mode of collective action against GBV, direct interference can disrupt the workings of the Female Fear Factory. To be clear, this is not simply because the sum of individual cases being prevented means that there are that many less victims of GBV, and thus direct interference is a kind of vigilantism, picking off aggressors one by one. While it is that case that direct interference makes a difference for the individuals in those particular cases, it also works to benefit the group to which those individuals belong, in that it destabilises the necessary conditions which allow cases of GBV to be normalised and occur uninterrupted. It has a socio-cultural impact as well as a case-specific one.

But, as is the case in many instances of praxis against an oppressive system, direct interference does involve risk. It requires that the audience, those witnessing acts of GBV, endanger themselves by stepping in and interfering. This is not an easy ask, and a sense of solidarity with the potential victim is needed in order for members of the audience to see her as worth the risk. This solidarity must be solidarity in the true, Schelerian/Frommian sense, solidarity with her as an individual worth saving in herself rather than because she is a representative of a group. However, this solidarity and responsibility is also motivated by shared experiences and feeling, and it is this shared experience and feeling which expresses the greater message behind the interference, a refusal to tolerate the normalisation of GBV. Such action needs to be informed by a recognition of a collective goal of working against GBV if it is to be repeated and conducted intentionally on a mass scale. Solidarity is thus central to the effectiveness of direct interference as a mode of praxis against GBV.

It has been argued that effective strategies to work towards shared goals can only be developed where there is true solidarity, and that this is only found within the collective person. There are two implications for direct interference as an effective strategy against GBV here. The first is that there must exist a collective person in which this strategy of direct interference is developed and enacted. I argue that women and other feminised individuals, who find themselves to be potential or even pre-victims of GBV, and whose fear is manufactured through the Female Fear Factory, can come to compose a collective person. However, this is not to say that they do currently. The possibilities for a collective person are there. Women (and feminised individuals) share an experience of being subject to the scripts which perpetuate the Female Fear Factory, and the impact these have on their lived experience, rendering them passive and fearful. They also experience a shared feeling of fear of GBV, and perhaps other shared feelings of anger and frustration due to the effect this fear has on them. There is thus a group identity (those who are deemed feminine within a masculine, patriarchal society), a shared experience, and shared feeling.

Although this is the case, however, women and other feminised individuals currently lack the crucial features of a collective person, namely a recognition of a shared group identity, and of each other as individuals within that group. They can

instead either be considered to compose a Schelerian society, in which individualism and self-interest prevails and a blind-eye is turned to another's suffering should intervening not be beneficial, or to compose a life-community, in which there is recognition of a shared experience and as belonging to a shared group, but responsibility is felt to individuals only insofar as they are representatives of that group, rather than because they have value in themselves. Ignoring the plight of one's neighbour, whose husband beats her, because of the risk that intervening poses to oneself, illustrates the self-interest of those in a society. Meanwhile banding together around a victim-figurehead, marching and protesting in her name, sharing in an anger that pervades throughout the protest, is a case of being a member of a life-community, where there is representable solidarity, co-feeling and co-experiencing, but no recognition of oneself and the women around you as individuals, merely as members of this shared group 'women against GBV.'

Nevertheless, as Scheler argues, the collective person succeeds the life-community and the society, and the fact that the collective person 'women and other feminised individuals' does not yet exist does not mean that it cannot exist. What is necessary is that women and other potential victims of GBV start to, first, recognise that they do comprise a group, a community, with shared experiences (i.e. they co-experience a lived experience as characterised by a fear of GBV) and feelings (feeling-with-one-another in the sense of a shared feeling of fear, originating within each individual potential victim and yet shared). This moves them out of simply a Schelerian society. However, while recognising that they comprise a group characterised by co-feeling and -experiencing, women and other feminised individuals do need to recognise that they are just that, individuals, whose experience and feeling of fear is their own, and that they are responsible for working towards eradicating GBV and improving their lived experience. Moreover, they also need to recognise the other members in that group as individuals, and that each individual's experience of fear and GBV matters because it is *their* experience, not only as it contributes the group's shared experience, and thus that *they* matter, not only insofar as they represent that group.

Thus, what is required is a change in how one perceives oneself and others in relation to the shared group identity of feminised potential victims of GBV. What is required is a change in consciousness. How such is to be achieved is beyond what can be discussed here, but a project of conscientization is necessary if the collective person is to form in which true solidarity between women and other potential victims of GBV can arise.

The second implication of the argument that an effective strategy of direct interference, as working towards a shared goal of eradicating GBV, can only be developed where there is true solidarity, and thus only within the collective person, is that direct interference relies on true solidarity in order to be effective. I already argued in the previous section that strategies targeted at a group's shared issues need to be developed in a mode of true solidarity, since they cannot

be enacted only at a group or individual level, and instead require a recognition of the way in which individuals can act collectively against a shared experience which impacts each individual in ways which are similar and yet unique to that individual. Such is the case with direct interference as a strategy to combat the shared experience of the threat of GBV and the manufacture of female fear.

Direct interference, as has been argued, hinges on its being enacted collectively in order to achieve the overall aim of disrupting the Female Fear Factory. However, the fact that direct interference is enacted collectively does not mean that the individual is subsumed by the group in mass action. Rather, each individual by herself recognises her membership in a group and her responsibility to that group, while also recognising her mutual-responsibility with other members of that group, as well as her self-responsibility to work against this oppressive feature of her lived experience. Direct interference, if it is to be effective, must also involve a recognition of the diversity of ways that GBV and the threat of GBV is experienced, because while there is a shared experience of the threat of GBV and a shared feeling of fear, some are more vulnerable to GBV than others and there are many different ways in which GBV is experienced. This is not only necessary for recognising individuals as such, but is also a pragmatic consideration, involving a consideration of the variety of way in which direct interference must be enacted in order to actually target all manifestations of GBV. Direct interference also requires that individuals recognise that this action is deployed not only to benefit other individuals, but also themselves and ultimately the group at large.

True solidarity is an instance of love, in the Frommian sense. This means that it involves four key elements, namely care, responsibility, and respect for one another, and knowledge of, *knowing*, one another (Fromm [1956] 1965b). These features of love are also features necessary for the enactment of direct interference. Responsibility has been extensively discussed, but care for another potential victim is also vital, as an “active concern for the life and growth” of another (Fromm 1965b, 26), and thus not wanting to see harm come to her. Likewise, respect is also necessary, as part of recognising another’s ‘unique individuality,’ and “is only possible if *I* [italics in the original] have achieved independence,” and recognise my own individuality (Fromm 1965b, 28). Finally, knowledge involves transcending oneself and seeing the other on their own terms (Fromm 1965b), as an individual who shares an experience and feelings with us, but who yet is the unique originator of these feelings, just as I also am.

Thus, in order for direct interference to be enacted effectively as a mode of praxis against GBV, there needs to be true solidarity between the members of the group enacting it. This is so because it is in true solidarity that one recognises others as individuals rather than merely as representatives of a group, and thus feel responsibility, care, and respect for them, such that one is willing to risk oneself in order to step in and prevent their becoming a victim of GBV. It also requires recognising the diversity of experiences and feelings of women and other

potential victims of GBV, despite there existing also co-experiencing and co-feeling amongst them, and that these individual experiences and feelings have value *alongside* the group experience and feeling. However, as true solidarity can only be fostered within the social unit of the collective person, which currently does not exist between women and other feminised individuals, such a social unit must be developed through starting to know one another, and thus to care for, feel responsibility towards, and respect one another – and ultimately, therefore, love one another (Fromm 1965b). Moreover, it also involves recognising that there is co-feeling and co-experiencing, and that one does have membership in a group with others who share in these experiences and feelings.

And so, if direct interference is to be employed as a mode of praxis against GBV, due to its practical ability to target pre- and potential victims, and its capacity to clog and disrupt the workings of the Female Fear Factory by destabilising the socio-cultural conditions which normalize female fear and allow for GBV and its perpetrators to go unquestioned, true solidarity needs to be fostered and the social unit of the collective person formed between women and other feminised individuals who form the group ‘potential victims of GBV.’

## **VII. Some Final Considerations**

The argument made in this paper does require that some final considerations be addressed. For example, it could be argued that if direct interference cannot be enacted effectively immediately but rather requires that a whole new form of sociality be developed, then it should not be taken seriously at all. Too much still needs to be done and developed before it can be implemented, wasting precious time while GBV still runs rampant. More immediately viable modes of action should be focused on instead.

However, while direct interference does require these not yet existing conditions for its effective functioning, it cannot be said that other modes of action are working effectively, as evidenced by the persistent prevalence of GBV. These modes of action, as I have argued, do not work to cut GBV off at the root, which direct interference does, and thus cannot be considered an alternative to direct interference. The value of direct interference remains. Moreover, the social unit of the collective person and the fostering of true solidarity are, as argued by Scheler and Fromm, things we should strive for regardless of their necessity for the enacting of direct interference. The collective person and true solidarity are not merely means to an end (the end being the effective deployment of direct interference) but are ends in themselves.

What has, admittedly, not been discussed are the practical considerations of this argument. How is the new sociality of the collective person to be developed? How are we to start caring for, feeling responsibility towards, respecting each other? A change of consciousness is necessary, but how is this conscientization to occur? And how is direct interference, as a mode of action, to be organised and enacted? Answering these questions is beyond the scope of this paper, which

seeks simply to show that direct interference should be taken seriously as a mode of praxis against GBV, but, in order for it to be enacted, a new idea of solidarity, *true* solidarity, must develop between women and other potential victims of GBV. The practical considerations of how this is to be reached must be the subject of further research. But the fact that *how* this argument is to be implemented is not clear does not negate the importance of realising it.

Finally, the role of men (not including feminised men who find themselves potential victims of GBV) has been neglected in this paper, beyond simply as aggressors and perpetrators of GBV. But it should be taken into consideration that there are also men who wish to work towards the eradication of GBV. And of course, men too can enact direct interference, and their status as masculine subjects under patriarchy puts them in a prime position to do so. They thus can share a goal with other individuals enacting direct interference and feel responsibility and even care and respect towards the women and other feminised individuals they seek to protect. But they cannot fall part of the collective person which shares the co-experience of a lived experience as characterised by a threat of GBV, nor the co-feeling of fear due to this threat. However, the individual is not restricted to membership within one collective person, and it could perhaps be argued that men can exist with women and other feminised individuals in another collective person, perhaps one arising from a sense of community, and thus feel solidarity with them in this space. Nevertheless, men are not excluded from direct interference as a mode of praxis against GBV.

### VIII. Conclusion

In this paper, I have argued that Pumla Dineo Gqola's proposal for direct interference in instances of GBV, thereby disrupting the workings of what she terms the Female Fear Factory by removing the conditions which allow for the perpetuation of GBV, should be taken seriously as a mode of praxis against GBV. I argue this because, while other modes of praxis against GBV are centred around victims and thus the aftermath of GBV, direct interference aims to prevent potential victims becoming victims, while also de-normalising GBV and the socio-cultural conditions which allow perpetrators to escape condemnation. However, direct interference requires a sense of solidarity between the audience and the victim, if it is to be enacted effectively.

I argued that the mode of solidarity required for the effective deployment of direct interference is the conception of solidarity found in the work of Max Scheler and Erich Fromm. I argued that Scheler and Fromm have similar conceptions of solidarity, focusing merely on different facets of the issue, and thus that their conceptions of solidarity can be taken together to form a cohesive understanding of true solidarity. Both Scheler and Fromm argue that true solidarity can only occur when individuals recognised each other and themselves as *individuals*, while also recognising their shared group identity, and thus their co-experiences and co-feeling. True solidarity involves not only a responsibility

towards the group, but also self-responsibility and mutual-responsibility with other individuals in that group. Scheler argues that such a kind of solidarity can only be found within the social unit of the collective person, while Fromm recognises the political potential that true solidarity has for the developing of strategies to address shared issues.

Solidarity, in the Schelerian/Frommian sense, is thus necessary if direct interference is to be enacted effectively as a mode of praxis against GBV. This is because it fosters the recognition of other's individuality and responsibility towards them as individuals rather than as representatives of a shared group, while also recognising that there is a shared group of women and other feminised individuals who are potential victims of GBV, and who thus share a co-experience of the threat of GBV and Schelerian feeling-with-one-another, namely a shared fear of GBV. However, if such solidarity is to be achieved within this group there needs to develop the social unit of the collective person. While such a collective person does not currently exist, the conditions are there for it to exist, and for the development of a sense of Frommian love between individuals.

While the collective person and solidarity should be sought as ends in themselves, they do also allow for the effective strategising and deployment of direct interference as a mode of praxis against GBV, a mode of praxis which, conceivably, not only women and other feminised individuals but also men could partake in. And while this is not a ready-to-go mode of praxis, its potential should not be ignored. Nor should the importance of formulating what it means to be in solidarity with one another and ensuring that solidarity really exists within the movement against GBV be neglected. As something which is often spoken about, its meaning and current realisation assumed, true solidarity needs to be critically considered and fostered. I argue that the conception of true solidarity which we seek to enact within anti-GBV movements, and which in particular needs to exist within Gqola's direct interference, can be found in the work of Scheler and Fromm.

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