Chapter 4 consists of two parts, Section A and Section B. Section A is a discussion of the results obtained through the various research methods. Section B reflects on the interpretations of those results.

SECTION A – RESULTS

4.1 INTRODUCTION

In this chapter the context in which the results were obtained, as well as the resulting themes, are discussed. In the chapters that follow, the pieces of my research puzzle will start falling into place. To start with, I shall be sketching the context in which my research took place, and in which understanding emerged. I shall therefore be taking you, the reader, into the heart of Acornhoek. I will also present you with an overview of the study, thus providing you with details of the process of my study, as well as the results obtained. As mentioned in Chapter 3, research was done by way of an interpretivist paradigm. Therefore, in this chapter my aim is to demonstrate that in analysing the data (by using the interpretivist paradigm), I gained insight into the volunteers’ experiences regarding the use of the Memory Box Making technique.

4.2 CONTEXT AND PROCESS

4.2.1 Context where understanding emerged

It was a cool and windy day in May 2004 when we (the facilitators and I) made our way from Pretoria in Gauteng to Acornhoek in the Limpopo Province for the first time. We were on our way to host a two-day workshop aimed at providing the volunteers with information on and training in the Memory Box Making as part of the bereavement process associated with HIV and AIDS. The research project resulted from earlier investigations conducted by focus groups and discussions with volunteers in this area (as mentioned in Chapter 3). As we drove through the mountains of the Limpopo Province, I was wondering what to expect from the research I’ll be embarking on soon. As we drove, the scenery changed from level grasslands to beautiful mountains, with
peaceful towns around each and every corner - quite a change from the busy city life with tall buildings to which I am accustomed.

Acornhoek seemed to have a lively buzz to it, with shops on the sidewalks for long stretches, and people sociably walking about. I was amazed at the entrepreneurial skills of the town, as most of the shops and vendors’ stalls seemed to be run by the town’s residents. Apart from the shops and street stalls, there were few signs of the industrialisation I was used to, living in Gauteng. Farm animals, such as donkeys and goats, roamed freely on the outskirts of the town.

The workshops were held at a centre in the town Acornhoek near Bohlabela. When we arrived there, the volunteers greeted us with contagious enthusiasm. My enthusiasm rose as we entered the building. It was a large, colourful and spacious building, abuzz with many young people laughing and chatting away. As we walked through the reception area, we were greeted by the volunteers of the centre in a very friendly manner and felt welcome right away. The room reserved for our training was especially spacious and bright and colourful chairs and a flip chart had been put out for us. During the two-day workshop I was amazed at the volunteers’ dedication to the training, as well as their eagerness to implement what they learnt. There were 14 youth volunteers and 16 home-based care volunteers that eagerly joined us in our training workshop. After completion of the two-day workshop, we informed these volunteers that we would be paying them a return visit and explained the purpose of that visit.

In October 2004 the time came for us to return to Acornhoek. As we took the same route through the mountains of the Limpopo Province, I was looking forward with great excitement to discovering what experiences and feedback the volunteers would bring with them to the focus group this time. I was somewhat disappointed when only ten volunteers showed up for this session, especially since the two-day training workshop had been so well attended and the volunteers had seemed so eager to apply what they had learnt during the workshop. Although the attendance was lower that I had expected, the focus group turned out to be of great value to my study. With feedback from these volunteers I could start putting everything together, for it was this part of the research process I had worked towards: to gain insight into how the community volunteers applied
the Memory Box Making technique to help people in their communities to deal with the effects of HIV and AIDS.

4.2.2 Getting started

The process of my research began when two researchers identified a need in a community in Acornhoek when they visited this community for other research purposes in 2002, as mentioned in Chapter 3. That was when the idea behind my research study first started developing. In May 2003 I took the first step in the research process by making contact with a contact person in Acornhoek. This was a telephonic discussion between Mr Benedict Sedibe and myself. We remained in close contact leading up to the date of our arrival on our first visit to Acornhoek for the two-day workshop. We exchanged e-mails on various logistic components such as the map to Acornhoek, the venue, and what we needed in order for our visit to be successful (also see Appendix H for a research diary outlining of the exact dates of contact that was made). Mr Sedibe informed us of the total number of the volunteers who would be attending the workshop, namely 20 home-based care volunteers who were working in the vicinity of Acornhoek. Once I knew how many volunteers would be attending, I could go out and buy the necessary materials for the workshop and organise accommodation for the time we would spend in Acornhoek. Soon everything was in place and I was ready to embark on my research.

4.2.3 The two-day workshop

On 18 and 19 May 2004, we presented the two-day workshop on the Memory Box Making technique in the centre in the main street of Acornhoek. This centre is a round, double-storey building painted in a variety of pastel colours, such as green, purple and yellow. When we arrived at the centre on the first day of the workshop, some of the volunteers were already waiting for us outside. Not all the volunteers live in Acornhoek and some had to travel to the centre by taxi, at their own expense, and arrived late. Those who were already there when we arrived seemed shy, yet as eager as to meet us as we were to meet them. When we entered the centre there were a lot of young people gathered around a pool table in the centre of the foyer, and one could also hear people chatting and laughing in the library area on the second floor.
The room made available to us for training was spacious and colourful chairs had been put out for us. There was also an old pool table. When we started the first session of the programme for the Memory Box Making workshop (see Appendix C for a breakdown of the programme, which consisted of 10 sessions held over the two days), about an hour after the scheduled time, not all of 20 the home-based care volunteers that we were expecting had arrived. We decided to invite the youth volunteers of the centre to join us in our workshop. This led to some degree of discontent among the home-based care volunteers that were present as they resented the presence of the youth volunteers at a workshop that had been arranged specifically for their benefit. We listened to their concerns and a compromise was reached, after which we could continue with seemingly satisfied participants. The next problem was that there was a shortage of materials, since instead of the 20 participants we had provided for, we now had 30. However, the participants did not mind sharing the paints, stickers, scissors, crayons and glue that we had brought for making and decorating the memory boxes. Another problem was that not everyone had a box to decorate. One of the youth volunteers found some empty condom boxes in the centre, handed them out to the participants who did not have boxes, and that problem was solved too! Another volunteer even dashed across the road to the Spar to ask for empty boxes there. To me this display of initiative was proof of their enthusiasm and commitment during the training workshop. Once each of the participants had a box, they could make and decorate their boxes.

The volunteers seemed very relaxed and comfortable during the workshop as some of them sat with their feet up, some found a sunny corner to work in, and others formed small groups and chatted away while making their memory boxes. At the end of the first day of the workshop, the sixteen home-based care volunteers voiced their disapproval of the fact that youth volunteers had been allowed to join them, stating that the Memory Box Making workshop had been intended only for them and they did not want the youth volunteers to join. We came to a compromise: it was decided that we would allow only four of the youth volunteers to attend the second day of the workshop as this would bring the number of participants to the number we had originally planned for during our preparations and there would be no need to share materials. The youth volunteers agreed to this decision and we could continue with the workshop. At the end of the second day’s programme (see Appendix C) the volunteers who had attended the Memory Box Making workshop each received a certificate of attendance, which was
much appreciated. (See Appendix E for an example of the certificate, as well as photos of the certificate handout.)

4.2.4 The return visit

After completing the workshop, we returned home to Pretoria. We planned for a four-month period during which the volunteers could explore the application of the Memory Box Making technique to support people in their communities who had to cope with the consequences of HIV and AIDS. During this time, I maintained regular contact with Mr Sedibe, mostly by way of telephone calls and e-mail correspondence. When the time came for us to return for the focus group discussion, Mr Sedibe and I made the final arrangements and set the date, as well as a time for the focus group meeting. We returned to Acornhoek on 12 October 2004. This would be our last contact session with the volunteers. After we had waited for approximately two hours to start the focus group discussion, eleven volunteers had shown up. Their reason for being late was that they did not reside in Acornhoek and did not have access to reliable forms of transport. There were nine female and two male participants, ranging in age between 23 and 41 years. Of these eleven volunteers, two were newcomers who had not attended the Memory Box Making workshop in May 2004, but had been trained by their colleagues and had started applying this technique to support people coping with HIV and AIDS. This group therefore included only nine of the original 30 volunteers we had trained.

4.2.5 Data analysis phase

After the return visit in October 2004, the process of data analysis began. As mentioned in Chapter 3, these methods are explained in the data analysis. I also made use of the analytic steps for thematic analysis, as explained by Terre Blanche and Durrheim (2002). After this process, various themes emerged from all the discussions we had during our time with the volunteers, as outlined in Figure 4.1 below. After the analysis phase, Mr Sedibe was contacted once again for the final phase in the research process, namely, member checking (Creswell, 2003 & Garrick, 1999). A letter, together with the themes and the transcripts, were send via e-mail to Mr Sedibe (refer to Appendix I), who then organised a meeting with the volunteers who had participated in the research process. During this meeting the volunteers discussed whether they agreed with the
uncovered themes and were given an opportunity to add to or change the themes that had emerged. After this member-checking process, Mr Sedibe confirmed the validity of the themes uncovered during my research and informed me that the volunteers had not added any statements. Member checking maximises the trustworthiness of the research data (Pitney, 2004 and Babbie & Mouton, 2001).

4.3 RESULTING THEMES

The themes uncovered during the data analysis phase of the research process are described below. These descriptions are enhanced through the inclusion of photos. The participants’ written consent was obtained for the use the visual data (refer to Appendix G), and of excerpts from the participants’ discussions during contact with them in May and October 2004.