SPIRITUAL NARRATIVES OF FEMALE ADOLESCENT ORPHANS AFFECTED BY HIV AND AIDS AND POVERTY

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ABSTRACT

HIV and Aids have been described as the worst epidemic the world has ever seen. It does not only take thousands of lives but it also deprives people of having a respectable life. This research is interested in what Aids is doing to the innocent children of South Africa. Children are losing not one, but sometimes both parents due to this epidemic and are left alone to fend for themselves. Young girls and boys are losing their most important role models, their mothers and fathers, during their adolescent years. Because of the dire poverty especially girls are at times sexually exploited by malevolent men. This research explores those factors which contribute to their survival despite horrifying conditions. By using the narrative approach it reveals the truly amazing stories of "the soul survivors".

1   INTRODUCTION

This article takes a closer look at specific children within the environment of HIV and Aids. Clearly aware of the devastating environment surrounding HIV and Aids we went on a search of orphans affected by HIV and Aids and their "God-given potential" amidst

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their despair. In our search we found multiple and diverse narratives. Surprisingly though not all of these narratives were about pain and sorrow. Some of these narratives contained aspects of courage; of falling but getting up out of the dust. It even contained lessons which can empower others in the same situation. Therefore the focus of the study shifted to the factors which contributed to these strange, but truly amazing alternative narratives of hope and love. We were in search of the factors which free us from the psychological burden of trauma. We were interested in the narratives which could tell us something about the role the idea of God plays in empowering these children to create hope for the future -- a future which will create opportunities to develop this God-given potential. Narratively speaking we were in search of the "unique outcomes" – the factors that lie outside the problem which contributed to the creation of hope! Therefore this article strives to reveal the underlying discourses, which help to write our stories in life as we pursue a better understanding of the meaning of various traumatic experiences, and which empowers us to face the unforeseen difficulties that lie ahead.

We invite the reader to take a glimpse of the world of these children. By voicing some of the findings we hope to open a keyhole that allows others to peer into a world which they might otherwise have missed.

The ultimate goal of the broader study is to describe these children's capacity of creating a form of liberation which has never been thought of as belonging to children, so that they will no longer be viewed as "victims", but as "survivors". Eventually the message being conveyed to our children will be that we as a society, sharing their pain, have not and will not forget them.

2   MOTIVATION FOR THE STUDY

> Wendy (13) is painting a picture of how children are forced to witness the slow and painful death of their parents from HIV/AIDS. She says: "The picture is of my home. The ambulance is fetching my mother. The flower is me. I have to stand tall, protect my mother and my home. My mother had another baby. I looked after her until she died and then I looked after the baby. He also died." Wendy told her story at the open-

ing of the national conference on Children affected by
HIV/AIDS in Johannesburg on Sunday night.

(*The Sowetan*, June 6, 2002)

The above story is one of thousands that are told daily by our Afri-
can children. South Africa can no longer ignore the devastating ef-
fects the epidemic of HIV and Aids has on our social systems. This
effect does not only pertain to the physical breakdown of HIV and
Aids victims, but is also the main cause of breaking the spirit of
thousands of people living in the environment of HIV and Aids.
"The lack of social security and high levels of unemployment in
South Africa means that poor households and communities slip fur-
ther and further into poverty and deprivation. Invariably the burden
of coping falls on women, particularly girls and grandmothers"
(AIDS Foundation South-Africa 2005).

Kilbourn adds further detail to this dire situation and helps to
emphasise how HIV and Aids is affecting our children:

> The adult-sized role thrust upon children leaves them
> with no time or energy for play, school, friends or de-
> velopment of relationships. Instead of a safe, healthy
> home and community environment, millions of chil-
> dren are forced to live in an environment of fear, inse-
> curity, suffering, poverty and trauma. Their physical,
> mental, spiritual and emotional needs are ignored.
>
> (Kilbourn 1996:13)

3   RELEVANCE OF THE STUDY

> The children of the world are innocent, vulnerable, and
> dependent. They are also curious, active and full of
> hope. Their time should be one of joy and peace, of
> playing, learning and growing. Their future should be
> shaped in harmony and cooperation. Their lives should
> mature as they broaden their perspectives and gain
> new experiences.
>
> (UNICEF 1991:53)

In reality though, more than 336 300 children under 18 are orphans
as a result of AIDS (cf Centre for the Study of Aids 2004). The real-

ity is that our children live in traumatic situations where their hope is replaced by despair. They live in paralysing fear, mistrust and deep grief and they carry burdens and responsibilities far too heavy for any child to bear. Deep in their spirit an overwhelming sense of hopelessness springs up; they see no opportunities to develop their God-given potential (cf Kilbourn 1996:13).

3.1 Research gap

The problem is that in these desperate circumstances, children are often overlooked as regards their spiritual needs. The family members and others taking care of them are in a race with survival and tend to concentrate on the most basic and immediate needs. The churches lose contact with the children after the death of their parents and the dismantling of the household. The children are shifted to other households and the existing support systems diminish.

The question which is not yet addressed adequately (research gap) is the following: What are the context and need of children severely affected by HIV and Aids and what are the possibilities for the creation of better support systems that will also take care of their spiritual needs?

3.2 Research approach

The narrative approach to qualitative research is used and is conducted according to the Seven Movements, developed by Müller on the basis of Postfoundational Practical Theology.

The first phase of the research has started and is nearing completion. Data collection was done by means of interviews. Interviews were first conducted with the caregivers[2] and through them with teenage children in different HIV environments. We worked with established NGOs in Gauteng (Heartbeat, PEN, and Hospivisie) and trained their professional workers and volunteers to do the interviews with the children. This was the first step in getting to grips with the reality in which the children and caregivers find themselves in. Open-ended questions were used in these interviews, as they provide space for the caregivers and children to voice their exact experiences of the situation as they feel fit.

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[2]   Interviews with caregivers were held on July 7, 2006, Mamelodi, Health Clinic

3.3   A river of despair

All the caregivers were in agreement that, for the children, the worst effect of losing their parents was the economical poverty in which these children find themselves in. They report that it is difficult to tend to the emotional and spiritual needs of the children, while they have a basic need for food. This corresponds to various studies which show that the traditional social structures, like the extended family, are under enormous pressure: An UNAIDS report states that "need for support is desperate in the worst-hit regions where the capacities of families are eroded by economic decline and deepening poverty..." (Report on the Global HIV and Aids epidemic 2002). This in turn results in family structures changing and households fragmenting, becoming poorer and facing destitution. "…[C]hildren in such circumstances are particularly vulnerable to exploitation" as they become the breadwinners for others (cf Facing Aids 2002:98).

The literature shows that the impact of the epidemic on significant others, causes them to suffer various kinds of psychological trauma. Studies report that "Psychosocial effects will be worsened by accompanying threats to the basic survival (food, housing, education, healthcare) and security (protection from exploitation and abuse) frequently experienced by orphans" (cf *The Sunday Independent,* 6 Oct 2002). It seems that significant others themselves need help to come to terms with their own fears and prejudices and the implications and consequences of their loved ones' plight (Van Dyk 2005:218). It is reported that significant others also experience feelings of depression, loneliness, fear, uncertainty, anxiety, anger and emotional numbness (cf Van Dyk 2005:218). Mostly, though, they often feel unable to cope with new demands that the infection places on them. They feel incompetent, unqualified and powerless in their interaction with the HIV-positive parent (cf Van Dyk 2005:218), and when the parent dies, they are unable to deal with the demands of life in general.

Children suffer tremendously when their parents are infected, and the needs of children with infected parents are often neglected. "In many African societies there is no tradition of talking to children as equals and on an intimate basis, caregivers often report seeing 'the suffering of children who are too often hovering in the shadows of a sick room, seeing and hearing everything but never addressed directly'" (UNAIDS 2000:33). Children are largely excluded from the

counselling process because caregivers often don't know how to talk to the children. The children in this study, however, had been given an opportunity to be part of a support group. This, they reported,[3] helps them tremendously, as they get time to debrief and discuss things which they find especially difficult to handle.

The struggle of poverty reinforces malevolent people to use this already disastrous situation as bait to exploit the young girl sexually. Sometimes poverty and need drive women from such communities to prostitution because this is the only way they feel they can survive. Their low self-image and lack of personal authority also make such women particularly vulnerable to rape. Young girls are often coerced, raped or enticed into sex by someone older, stronger or richer than themselves. It is well known that older "sugar daddies" often offer schoolgirls gifts or money in return for sex (Van Dyk 2005:25). Faced with overwhelming poverty, a woman who works in a brothel may reason: "If I work here I may die in ten years. If I don't, I will die of starvation tomorrow" (*Facing Aids* 2002:15–16).

In conclusion it is evident that HIV and Aids is indeed a "disease in motion". Apparently Aids has thus far reached a stage where it flows like a river: into every crack, into every hole, around every corner, until it fills our souls with enough despair, so that all that is left of our bodies and souls is a wreck on the bank of the river.

Many reported that the household duties and the expectations to perform on an academic level became a burden sometimes too heavy to bear. Most girls experienced the death of their mothers as a great loss, as they did not feel comfortable to confide in their grandmothers. Some expressed this loss as "the loss of their greatest confidant"[4]. One girl[5] burst into tears when she stated that she missed her mother very much and still found it difficult to deal with the loss. She added: "I always talked to my mother and she always gave me advice. Now I have no one to talk to". Most girls said that their mothers were the sole motivation behind their efforts to succeed in school. They remembered very clearly, the words and advice from their mothers which guide them through life. They stated: "I want to make my mother proud".

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[3]   Interviews held with children in August, 2006
[4]   Personal interviews held in August, 2006, Nelmapius, Heartbeat centre
[5]   Names of the co-researchers are excluded for the sake of confidentiality

It was very apparent how responsible and "grown up" these adolescents were. Some of them even attended special schools/courses during school holidays as a way to better their futures. Other girls got temporary jobs in the holidays to help them with the care of their family. They stated that they want to have "a good job one day" which will make it easier for them to tend (financially) to their siblings' needs.

In our study one girl[6] found it very difficult to cope with her mother's death. She lives with her grandmother while her older sister lives in the Free State and takes care of her younger sister. This girl stated that her mom died of "stress" and her biggest fear was that her sister, who took over the responsibilities of caring for the family, may also die of too much stress.

In her story and accompanying fears it is evident how she used her experiences to construe her own conclusions. As the African culture usually excludes children from the explanation of a death (Van Dyk 2005) it seems only natural that she will come to her own understanding. This explanation is the "lens" she uses to look at her current world and contributes to her accompanying fears of the future. These children seem very aware of the dangers of HIV and Aids, but most stated that they did not know the reason for their parents' deaths. They all construe their own alternative explanatory story which guides their lives in various ways.

3.4 Africa, praying to God and dancing for the ancestors

This step involves the description of experiences as it is continually informed by traditions of interpretations. "The metaphor of social construction leads us to consider the ways in which every person's social, interpersonal reality has been constructed through interaction with other human beings and human institutions and to focus on the influence of social realities on the meaning of people's lives" (Freedman & Combs 1996:1). Therefore we must acknowledge the influence of the wider macro system on the experiences and interpretations of the individual. According to social Constructionism, there are specific traditions/discourses in certain communities which inform perceptions and behaviour.

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6 Personal interviews conducted in August, 2006, Nelmapius, Heartbeat centre

In the various meetings between the co-researchers and I, it became evident that they find themselves in an environment which is intermeshed with the various values and traditions of the African culture, and one which struggles to integrate the meaning of HIV and Aids in this world-view.

In reflection of the literature it became evident that the African cultural perception of it is directed by intention and specific cause. They search to identify the cause or the intention behind the cause and to neutralise or eliminate it. They also believe that mental as well as physical illness can be caused by disharmony between a person and the spiritual world, by natural causes, or by a breakdown in human relationships. Sometimes however, it is believed that ancestors do not actually send illness themselves but merely allow it to happen by withdrawing their protection (Van Dyk 2005:116).

Furthermore there is a close connection between the ancestors and God as causal agents of illnesses. Most Africans, especially in Western society does in fact believe in the existence of God; though God is seen as too important to be bothered with everyday problems (Van Dyk 2005:116). Therefore they incorporate their ancestors in guiding them in everyday issues. "The living spirits of the deceased ancestors are the 'mediators' between the people and God" (Meiring 1996:13).

The untimely death of innumerable young people and the unprecedented lowering of life expectancy among all groups and classes of people reinforce the idea of punishment from the ancestors, as death in African societies is accepted as natural only when elderly people die. In most other cases death is seen as a punishment or as the work of evil spirits and witches (Van Dyk 2005:118).

The question arises why this grand narrative of believing in ancestors and witches still prevails in the midst of a well Westernised society, as is the case in South-Africa. Van Dyk (2005:118) explains that there are some psychological benefits enmeshed in this belief.

> If extended factors such as witches and sorcerers are blamed for Aids, this projection of responsibility consoles the family, victims and society as a whole. It also …. helps to alleviate feelings of guilt and anxiety … Attributing HIV infection to witchcraft may also help the bereaved family to avoid feeling stigmatised by their community (Campbell & Kelly, 1995).
>
> (Van Dyk 2005:118)

A widespread misperception exists that children do not understand God and religion. This is also apparent in the African tradition where the issue of death is not discussed with children. The fact that ancestors act as mediators between God and his children (Meiring 1996:13) implies that direct contact between God and his children is impossible. Where do our co-researchers go for guidance then?

In asking this very question to the co-researchers in a group meeting[7] the girls made their religious affiliation very clear. Most girls describe themselves as "born again Christians" following the deaths of their parents. Some continue their mother's affiliation towards ancestor–guidance and others are set against ancestry. Whatever their viewpoint, all of them find their power and courage in prayer and church meetings. It seems that the church community also plays their part in encouraging these children. Some children reported that they do not attend church as they feel they can pray and sing at home. Others think it is very important to go to church as they see it as their duty as members of the church community. All of them though, reported that they have a new-found relationship with God as "He is the only one that comforts me and the only One I could rely on". They also report that they believe that their mothers are with God and this comforts them. One girl who relies very much on God's comfort and guidance stated that she experiences her mother's presence through her relationship with God. Two girls actively took part in ancestry evoking activities, but both of them stated that this is a tradition they learnt from their mothers as their mothers were seen as "sangomas" in their community. They stated that they also found connection with their mothers through this religious activity. It seems that the community's beliefs regarding ancestry also provide these girls with comfort and support.

It is clear that these children do not experience contact with God as impossible. This may be the result of Western Christian influence, as many girls said that a central idea of Western Christianity is that it doesn't allow the worshipping of ancestors,(Van Dyk 2005:119). This study thus concludes that faith, for these children, indeed plays a vital role in the construction of their narratives, and has an underlying meaning which in turn influences their paradigm of the world. This correlates with studies of faith, as Fowler (1986:25) explains "Faith is the process of constitutive-knowing which underlies a per-

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[7]   Group interviews conducted September, 2006, Heartbeat centre, Nelmapius

son's composition and maintenance of a comprehensive frame (or frames) of meaning". He further states that faith "…gives coherence and direction to persons' lives, links them in shared trusts and loyalties with others, grounds their personal stance and communal loyalties in a sense of relatedness to a larger frame of reference, and enables them to face and deal with the limit conditions of human life, relying upon that which has the quality of ultimacy in their lives" (Fowler 1996:56 in Slee 2004:29).

My interests were further stimulated by curiosity about the difference between religious experiences of males and females. Carol Gilligan (1987, according to Slee 2004:23). found "that women's moral thinking is characteristically relational and contextual in a way which is not true of men" and that the women in her study "appealed to the needs and demands of a relationship and to an ethic of responsibility and care, in their attempts to resolve moral dilemmas"). Surrey (1991:52-53, according to Slee 2004:24) states that the self is organised and developed in the context of important relationships, as well as relationships "being seen as the basic goal of development"

These relational psychodynamic theories make us aware of the impact of the early years of childcare on an individual's later relationships, of which the relationship to God may be one. We have seen that the relationship that the girls had with their mother inevitably influenced their religious affiliation. These theories also suggest that religious symbols, narratives and practices will be interpreted and internalised by the individual not only through the cognitive structures available to that individual, but also through the dynamics of their attachments, both present and past, to significant others. This is apparent where the girls feel a connection with their mothers through their relationship with God. Therefore they also highlight the strongly relational orientation of women's thinking and identity, which is likely to have a profound influence on women's appropriation of faith (cf Slee 2004:24).

In one group meeting[8] specific questions arose in the spiritual narratives of the group members and we had a controversial discussion concerning these questions. Some children wonder why God allows/causes Aids. They also wanted to know[9] "if Aids is a punish-

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[8] Group meeting conducted in September, 2006, Heartbeat centre, Nelmapius

[9] Due to the restrictions of this article no attempt will be made to answer these questions

ment from God?" (cf Facing AIDS 2002:27). One girl specifically asked: "Does God forgive people with Aids?" Therefore the influence of Christianity can be seen in the beliefs of some African Christians who believe that "Aids is God's punishment for immorality and sins" (Van Dyk 2005:116).

As narrative therapists we are not interested in the answers to these questions, but in the meaning behind these questions. In these children's reasoning there exist a mystic relation between everything and everyone in the world, alive and dead. Everything is seen as part of each other, and as having an influence on one another other (Meiring 1996:3-4). This correlates with the African perception of illness and their need to know "Why?" or "Who?" (Van Dyk 2005:116).

During the conversations[10] between the co-researchers and myself we frequently engaged in conversational questions with the aim of thickening their narratives. In the discussing of their feelings and struggles we aimed at *externalising* those factors which proved to be challenges. It soon became clear that the main struggle for these girls was the feeling of "missing their mothers" and doubt if they could deal with life alone.

Instead of naming the problem we collectively decided to change these stories of "sadness" and "loneliness" into narratives which provided space for the idea that it "is ok to miss my mother". Therefore we discovered the *unique outcome*. We then filled out this unique outcome by means of deconstructive questioning. These positive memories were then used constructively to create material which reminded them of their mothers. They collected material things of their mothers and they made notes of things their mothers said which they would like to remember. Thus by using *imagination* as a tool, we "reconstructed" their mother's "presence".

We then thickened this alternative possibility by creating memory boxes which they could fill with all these concrete created memories of their mothers. The children decided that this could help them to always keep their mother's loving memories near. They decided that whenever they needed courage, or words of inspiration, they would return to this "box" to recreate proximity of their mothers. They also stated that they wanted to save the memory box to show to their children in the future. In this way they could show their mothers to their children, extending the memory of their mothers. In

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[10] Personal interviews conducted from June to September, 2006, Heartbeat centre, Nelmapius

reflecting on this progress I returned to the co-researchers in asking how and if this memory box could benefit their lives. They replied that they felt comforted and motivated in holding the memories of their mothers nearby.

In explaining why they found the idea of a memory box so appealing we can return the African idea of personal immortality through children": "After physical death, people continue to exist in the *Sasa* period as the 'living dead' for as long as they are personally remembered by name by relatives and the friends who knew them during their life and who have survived them" (Van Dyk 2005:121). This stresses the importance of discovering the grand narratives that underlie people's narratives, which directly also influence their language. It is imperative then to speak in the children's language to connect to what is most important to them.

4 REFLECTION ON THE PROCESS

In reflection of the process it is imperative that we should keep in mind that "For Practical Theology to reflect in a meaningful way on the experiences of the presence of God, it needs to be locally contextual, socially constructed, directed by tradition, exploring interdisciplinary meaning and it needs to point beyond the local" (Muller 2005:78). This is a circular process which continues until satisfactory interpretations have been made. This article has showed how interpretations are grounded in experience and how it may differ from one person to the other.

By placing this framework within the Cultural-Linguistic Model for Pastoral care, the dynamics of language, culture and subsequent interpretations become evident. Gerkin (1997:111) explains that this model's "structure emphasizes both the human penchant for structuring life according to stories, and the power of interpretation to shape life and express care". It facilitates an open dialogue between the Christian story and the particular life story of the Christian. "This is a dialogue that will include the sharing of feelings, stories of past experiences, mutual questioning and search for authentic connections between the two poles" (Gerkin 1997:112).

5   CONCLUSION

This article has showed how the adolescent orphan girl comes to an interpretation of her situation by incorporating the situational and cultural cues in the environment in her story. It also showed how she experiences the presence of God within her context and how this experience re-writes her story of hopelessness into one of hope. Thus the tension between the story of her tradition, both African and Christian and between her specific life situations is evident. The writing of an alternative story has equipped her efficiently to obtain a connection between the two poles, which need not be in opposition. Therefore the narratives amidst despair need not always be one of hopelessness. It can be transformed into one of hope and strength. The fact that these girls have survived to tell their story is an amazing phenomenon in itself.

In reflection on how the churches can aid these children affected by HIV and Aids and their role in these orphans' lives, it can be recommended that the churches should increase their level of awareness about HIV and Aids and its impact on the lives of the children left behind. By assisting these children in finding a connection between the reality of their life stories and the message of God's story, the churches can fulfil their role as pastoral caregivers in helping them to create a future narrative of hope. If the churches can find a way to decrease the tension between the children's current story of despair and God's message of salvation, more children will turn to their spirituality to guide them through life. This way God's story can become the lens through which every other experience in life is interpreted.

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