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IMMERSIVE AND COUNTER-IMMERSIVE STYLES OF WRITING AIDS IN SINDIWE MAGONA'S *BEAUTY'S GIFT* AND KGBETLI MOELE'S *THE BOOK OF THE DEAD*: A DIDACTIC APPROACH TO WRITING AIDS

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Abstract

Two distinct responses to the growing body of literature on AIDS, according to Joseph Cady, are immersive and counter-immersive AIDS writing. The former addresses itself to the denial which has dominated worldwide reaction to AIDS, and confronts this denial squarely in an effort to undo it. Central to immersive writing is an attempt to thrust the reader into a direct imaginative confrontation with the special horrors of AIDS, and thus forcing him/her to deal with these horrors with no relief or buffer provided by the writer. In Magona's *Beauty's Gift*, this is evident when Beauty wastes away suddenly, but denies that something is seriously wrong and in fact colludes with her husband (the alleged culprit who infects Beauty with HIV) in an effort to avoid the stigma and shame associated with admitting she is infected with HIV and AIDS by maintaining the denial and silence surrounding the disease. The latter also recognizes the dreadfulness of the disease and indicates the problem of denial in the larger society, but its stance towards the denial seems to be deferential. As is the case with counter-immersive writing, Moele's novel, *The Book of the Dead*, focuses on characters who are themselves in various degrees of denial about AIDS, and it treats its readers the way the characters handle their disturbing contact with AIDS, protecting them from a jarring confrontation with the subject by using a variety of distancing devices. What the two novels succeed in revealing is that free availability of knowledge about how people get infected with HIV, how HIV spreads, and how individuals can protect themselves against infection by either condomizing, abstinence, etc., does not always translate into changing sexual behavior, and this applies to people of all races, the rich and the poor, the educated and uneducated, and the young and the old alike.

Keywords

AIDS denialism, silence

About the author

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A large amount of literature on or about AIDS internationally, in particular Europe and the US, locates AIDS within the gay community. This is because when AIDS first appeared in the 1980s in America, it first manifested itself among three marginalized groups—the gay community,

intravenous drug users, and prostitutes—groups that refuse to obey social, legal, religious, or moral restrictions on behavior (Murphy and Poirier 226). Because these are socially marginalized groups by definitions of sexual “normalcy” and narcotic legality, AIDS infection tended to carry stigma and shame. However, the appearance of AIDS in America also shifted AIDS from being an unspeakable and untouchable phenomenon to being a semi-acknowledged albeit still daunting reality. Clum posits that narratives about AIDS among the gay community suggest the following equation: sex=disease, homosexuality=disease, promiscuity=disease, and finally, homosexuality=promiscuity=disease, and this enchains people with AIDS and by association, men (qtd. in Murphy & Poirier). Clum posits that AIDS is responsible for millions of personal tragedies. This in turn has generated personal literary forms of writing such as memoirs, poetry, and written, staged, and filmed fictions that focus on the effects of AIDS on individuals infected or affected by it. In particular, these narratives have shifted the spotlight from the homosexual character/s with HIV/AIDS to their family’s problems in coping with the news that the person concerned is homosexual, since homosexuality is equated with and presented as the cause of AIDS. According to Cameron, “there is no doubt that people thought and still think of those with HIV and/or AIDS as contaminated with a vile, self-induced affliction. Such narratives almost always view HIV/AIDS as a result of past sexual transgressions on the person with AIDS (PWA) and therefore one can argue that HIV/AIDS is seen as punishment for these past transgressions” (52).

In the two novels under study, by contrast, HIV/AIDS is located among the heterosexual community. Indeed, in South Africa, this is the group that is visibly beset with HIV/AIDS. This does not suggest that HIV/AIDS is not a problem within the gay community in South Africa. Despite the progressive constitution of South Africa which guarantees equal rights to all people irrespective of gender, race, and sexual orientation, the reality of the matter is that South African society is still both conservative as well as hostile towards those who disclose their alternative sexual orientation from the norm. Some communities do not only discriminate against gay people but also exercise intolerance through the use of negative labels like “dyke,” “faggot,” “isitabane,” “moffie,” etc. to refer to members of the Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) community. In addition, there are many instances in South Africa where intolerance against gay people, in particular lesbians, has manifested in the form of violent acts such as the notorious “corrective rape” (in which lesbians are supposedly “taught a lesson” and forcibly made to acknowledge their roles and place in society) and murder. In such a hostile environment, one may not expect members of the LGBTI community to write personal testimonies documenting their contact with HIV and AIDS as this would make themselves vulnerable to attacks, with HIV/AIDS carrying stigma and shame and homosexuality meeting societal disapproval on the grounds of immorality and sexual deviancy. Furthermore, in South Africa, women who publicly disclose their HIV positive status

make themselves not only vulnerable to attacks but also targets for murder. The case of Gugu Dhlamini, a 36-year-old woman of Richmond farm near Kwa-Mashu in KwaZuluNatal, who was stoned and stabbed to death because she had disclosed her HIV status on radio, is a good example. Her attackers accused her of shaming her community by announcing her HIV status in public. To make things worse, although prosecution had brought charges, these were later dropped for lack of evidence (Cameron).

Unlike in Europe and the US, the AIDS equation in South Africa seems to be promiscuity=disease=HIV/AIDS=Death. Because of the stigma attached to having HIV/AIDS, it is common for persons infected with HIV or suffering from AIDS to either maintain silence or denial, because admitting to being HIV-positive is perceived by many as admitting promiscuity and/or immorality. Sadly, because of this silence and denial that surrounds HIV/AIDS, people who could have benefited from the disclosure by modifying their sexual behavior, after seeing the shocking transformation and the pain and suffering the person with AIDS (PWA) incurs, do not reap the benefit anymore. In spite of the stigma and shame associated with HIV and AIDS in South Africa, a few well-known personalities from both the homosexual and heterosexual communities and from both black and white communities have thrown their weight behind the fight against AIDS by either supporting the cause or disclosing their positive HIV status. These include Simon Nkoli, a former youth activist against apartheid, Judge Edwin Cameron, a human rights activist, and Zackie Achmat, a Treatment Action Campaign (TAC) activist. They have not only publicly disclosed their HIV positive status, they have also written very informative testimonies about the struggle of living with HIV, which have been very useful not only to those infected with HIV and AIDS but also to those who act as caregivers to those with HIV/AIDS. However, one person, Gugu Dhlamini, who disclosed her HIV positive status publicly exposed herself not only to prejudice and discrimination, but also to death. She was stoned and stabbed to death in 1998, her only crime being her disclosure to Zulu language radio listeners that she was living with HIV. Other Very Important People who have taken a strong stand against HIV/AIDS include former president Nelson Mandela who says, "AIDS is no longer just a disease, it is a human rights issue," and IFP president Gatsha Buthelezi. Both have vowed to fight the denial and silence surrounding HIV/AIDS by publicly announcing that they have lost sons to AIDS.

Edwin Cameron, in his memoir *Witness to AIDS*, provides a multi-faceted definition of AIDS and highlights the various meanings of having HIV/AIDS to those diagnosed with the disease:

AIDS is a disease. It is an infection, a syndrome, an illness, a disorder, a condition threatening to human life. It is an epidemic—social crisis, an economic catastrophe, a political challenge. A human disaster. (42)

From this definition, one can see that AIDS affects people on many levels: physical, psychological, societal, economical and political levels. Secondly, Cameron explains the connotative meanings associated with having AIDS:

AIDS is stigma disgrace discrimination hatred hardship abandonment isolation exclusion prohibition persecution poverty privation. AIDS is metaphor. It is a threat a tragedy a blight a blot a scar a stain a plague a scourge a pestilence a demon killer rampant rampaging murderer. It is made moral. It is condemnation deterrence retribution punishment, a sin a lesson a curse rebuke judgment. (42)

From the second definition, one can see that the connotative meaning of HIV/AIDS conveys negative images of dirt, contamination, punishment for wrong doing, and painful death.

In this paper, the critical framework I employ to investigate how HIV and AIDS are dealt with in the two novels under study is taken from the work of Joseph Cady of the Division of Medical Humanities at the University of Rochester. Joseph Cady asserts that the denial that has dominated worldwide cultural reaction to AIDS has brought about two distinct responses in the body of literature about the epidemic: immersive AIDS writing and counter-immersive AIDS writing (qtd. in Murphy and Poirier 245). The former, according to Cady, concerns itself with the denial surrounding the existence of AIDS, and confronts this denial squarely in an effort to undo it. It does this, among other things, by confronting the reader with the horrors of AIDS and requiring the reader to deal with these horrors without any relief or buffer provided by the writer. Counter-immersive AIDS writing, by contrast, according to Cady, also recognizes the dreadfulness of the disease and acknowledges the problem of denial in larger society, but its stance towards the denial is deferential. It does this by focusing on various characters or speakers who are in various stages of denial about AIDS, and it customarily treats its readers the way it handles the characters' disturbing contact with AIDS. As Cady suggests, counter-immersive AIDS writing protects readers from an ugly confrontation with the subject of AIDS by using various distancing devices. In this paper I argue that both novels approach the subject of HIV/AIDS by employing both immersive and counter-immersive strategies, and both novels have a didactic function. I will first discuss *Beauty's Gift* and then proceed to *The Book of the Dead*.

BEAUTY'S GIFT

Like many AIDS narratives, *Beauty's Gift* by Sindiwe Magona has created a story revealing silence and denial about AIDS. This novel exhibits elements of both immersive and counter-

immersive AIDS writing. At the beginning of the novel, silence and denial dominate Beauty's contact with HIV and AIDS. Indeed, both the FFF (her best friends) and readers are neither aware of her HIV positive status nor of the fact that her immune system has become so weak that her HIV has turned to full blown AIDS. As typical of counter-immersion, there is no ugly confrontation between readers and the person with AIDS (PWA). As already mentioned, not even her close friends, the FFF, are aware that she is dying of AIDS. This has been skillfully achieved by removing her from the activities of her circle of friends, leaving them thinking her absence is caused by her having rekindled romance in her marriage. As a result they learn the truth about the true nature of the illness too late. Their failure to connect her mysterious sickness, which comes out of the blue with symptomatology associated with HIV and AIDS, makes them suspect to denial especially since Beauty's husband, Hamilton, is a known philanderer.

The novel begins with Beauty's funeral and then traces her short life, interrupted by AIDS at its prime by using Amanda as the third person narrator. Although there is obvious sadness and grief associated with the passing away of Beauty from an AIDS-related disease, we as readers are spared from experiencing the raw feelings of grief squarely. Funerals are very sad events, but in this particular one, the sadness and grief associated with death is contained. We as readers are shielded from the grief and pain suffered by surviving relatives. As typical of counter-immersive writing, the funeral proceedings and service are dominated by secrecy, silence, and denial. Many euphemisms for death are employed (something not peculiar in the discourse of death). For example, in talking about Beauty's death, Nosisa uses phrases like "she was gone," then she says, "she was stolen away," and finally they "didn't see she was going." What is striking is that nowhere during the service are the words HIV/AIDS mentioned. Instead, Nosisa renames AIDS by calling it "the illness" or "TB." In the communities where the spread of HIV is still a big challenge, refusing to name HIV/AIDS does not contribute positively to the fight against the epidemic.

Because AIDS is a sexually transmitted disease, the sexual history of the PWA and his/her associates is particularly important in AIDS literature (Jones, qtd. in Murphy and Poirier 226). However, in this case, it is not Beauty's sexual history that is suspect but Hamilton's, the husband. Jones asserts that AIDS is acquired because one is a certain kind of person, one who refuses to obey social, legal, religious, or moral restrictions on behavior. As already mentioned, in this case, it is Hamilton's behavior that is thrown into question as one who disobeys the social and moral restrictions on married behavior by having extra-marital affairs with younger women, mockingly referred to as "yanga-yangas" in the novel. Jones also divides PWAs into two groups: innocent victims (innocent because they have broken no rule) and those deserving the disease. In this categorization, Beauty is the innocent victim while Hamilton is the culprit. As far as Amanda

and Cordelia are concerned, there is no doubt whatsoever that Hamilton is the one deserving the disease; he is the one who infects Beauty with HIV, which later becomes full-blown AIDS.

Of interest are the different stances taken by the FFF and Mamkwayi on the cause of Beauty's illness and death. Edith attributes Beauty's death from AIDS to Hamilton's unfaithfulness in marriage. Cordelia's belief in Beauty's innocence and Hamilton's guilt is implied in her reference to Beauty as "angel" (96), while Amanda and Cordelia refer to Hamilton as "that dog" (15), "your abuser" (27), "the rat," etc. Surprisingly, Beauty's mother, Mamkwayi, is more cautious about pointing fingers at who has infected whom with HIV/AIDS. This is evident when she confides to the FFF that Hamilton's relatives are angry with him for silencing Beauty by not letting anyone by her bedside shortly before her death. She speculates that it may have been because "he didn't want us to know which one of them gave this terrible disease to the other." This statement from Mamkwayi is very important especially since AIDS, as a sexually transmitted disease whose spread from infected to uninfected person, is difficult to trace. More importantly Mamkwayi, in her wisdom, acknowledges that women just like men can be responsible for HIV seroconversion. However, Mamkwayi is also guilty of denial as she evades mentioning the word "AIDS" in talking about the cause of Beauty's death. Instead, at first she substitutes the word "AIDS" with the word "secret," and later substitutes it with the phrase "the terrible disease." During the funeral, other characters also avoid using the term "HIV/AIDS" and substitute it with the "disease of children." This renaming of HIV/AIDS is a strategy that is used a lot in gay literature according to Jones because it enables the author to push the disease to the edge of fiction so that it is the effects on the life of the individual that takes the central position (qtd. in Murphy and Poirier 228).

Through Hamilton, the so-called culprit who ironically exhibits no symptoms of HIV/AIDS while Beauty the so-called "saint" dies of it, Magona is sending a strong message that one does not have to be the one who "breaks the rules" (e.g., by engaging in promiscuous behavior) in order to catch HIV and possibly die of AIDS. Indeed, through Beauty, we see that one may not do anything wrong at all. Yet lack of wrongdoing does not guarantee immunity against AIDS. An even stronger message Magona is sending here is that "good," morally upright women like Beauty should also be smart enough to assume agency in their lives in the fight against AIDS. Magona seems to be saying that women can no longer use the excuse that men do not want to use condoms. This is evident when the rest of the FFF adopt a "no condom, no sex policy" and do not change their views even when their marriages are under threat of breaking down. Since one of the ways in which HIV/AIDS is transmitted from an infected to an uninfected person is through unprotected sex, Magona seems to be saying that women should be the ones in the forefront in the sex act by taking responsibility for protecting themselves against catching the disease through a variety of ways—these include insisting that their partners wear condoms, wearing female condom themselves, or refusing to

have sex without using condoms. Another issue that Magona seems to be highlighting here is that infected people are not branded (in the buttocks or forehead), so one cannot identify them easily. The description of Hamilton during the funeral, who in all possibilities is likely to be HIV-positive, attests to this. He is described as “the tall man who stepped forward looking as though he’d just stepped out of *GQ*.”

Through Hamilton’s physical appearance, Magona does two things: first, she dispels the myth that people with HIV/AIDS exhibit tell-tale signs and are easy to identify. Second, Magona seems to be sounding a warning to married women that those who fail to take responsibility for protecting themselves in a relationship deserve the fate that befalls them. Sadly, Beauty gains this valuable insight too late. Hence, her only wish for Amanda (and the rest of the FFF) is for her (and the rest of them) to live long until she/they grow/s old; “ukhule” [ude ukhokhobe] in Xhosa. This message, referred to as *Beauty’s Gift* in the novel, is an act of selflessness on her part as she, literally on her death bed, does everything she can to prevent a repetition of what has happened to her. By not only warning her friends to protect themselves from HIV/AIDS, but also by mobilizing them to take action before it is too late, Beauty ensures that her death is not in vain. Looked at this way, her life can be viewed as a sacrifice meant to ensure that her friends live long. By failing to assume agency in her life, Beauty pays the ultimate price and becomes complicit in her own demise. But according to Magona, this is inexcusable. Amanda articulates her grief at the loss of her best friend by asking two rhetorical questions: Why is it that Hamilton is the one who is alive? Why is Beauty dead while her playboy husband lives?

However, there are several instances when immersion is employed in *Beauty’s Gift*. The first time we as readers are exposed to a graphic representation of Beauty’s illness is on the day of Amanda’s lunch to celebrate her 35th birthday with the FFF alone. On this particular day, Beauty arrives late without apologizing for her lateness. By the time she arrives the rest of the FFF are slightly annoyed with her, but when they see the change she has undergone, they are so shocked that “all four stare at the approaching figure. The grotesque face that appears in place of Beauty’s leaves them all speechless.” She has swollen lips, which the writer describes by using the metaphor of a “raw steak,” and “a little swelling around the eyes.” The second instance in which immersion is employed is on the Thursday visit which Amanda pays to Milnerton to see Beauty when she finds Mamkwayi alone with her. As she gets closer to the bedroom, her olfactory sense is assaulted as she approaches the patient’s bedroom. We are told,

The stench hits you, grows with each step you take towards the bedroom, now the sick room. The door is closed, but the odor is insistent. It is everywhere. Disinfectant,

air freshener, Indian sticks, aromatic candles—nothing seems to make a difference, the suffocating smell reigns supreme. (57)

In this scene, the reader is not spared from the confrontation with the ravages of HIV/AIDS. All efforts to contain the “stench” by using air fresheners, Indian sticks, and aromatic candles are in vain. Amanda can smell the repulsive smell of death from afar. In addition to appealing to the olfactory sense, Magona also uses visual images to ensure that the reader cannot escape the ravages of HIV/AIDS, as in the description of Beauty’s “shrunken” and “skeletal” form. Amanda observes that “only the head is still the same size—now seeming huge, disproportionate to the rest of her body. And in that huge head, her eyes are two deeply sunk coals.” Comparing how Beauty was on her birthday with how she is at present, Amanda concludes that her friend has been reduced to “Bone. Nothing but bone.” When Amanda helps Beauty’s mother change her clothes, she was appalled to witness the “angry-looking, oozing, sores” that cover Beauty’s body, and her unpleasantness as she “cries and curses when touched anywhere except on her face, hands or neck. Everywhere else is a no-go zone.” Here too readers are made to experience the devastation and are thus made to share Amanda’s disbelief and despair.

The last example in which the subject of HIV/AIDS is dealt with immersively is on the day the FFF visits Beauty at 8 Mnga Street, Malunga Park. Again, Beauty’s transformation is vividly portrayed through disturbing visual images. We are told,

Beauty struggles to sit up. Struggles up until she is slouched over the pillow at her knees, or where her knees should be. She’s so thin now that there’s nothing there. The blankets are flat. Flat till where the feet stick up as though disjointed, things with no link at all to the scrawny neck jutting out from the blankets that are hiding the emaciated stick of a body.

Here the havoc AIDS has caused in her body is evoked by the dehumanizing words employed in describing her body parts—her “feet” as “things” and her “body” as “an emaciated stick.” Her neck is described as “scrawny”; “when she tries to smile, her lips crack” and “they ooze tiny droplets of thin brown blood”; her “lips are dry” and her “gums are shrunken.” As Amanda puts it, the wan smile she manages is a ghost of what it used to be; gaunt dongas have eroded her pretty face. Put simply, AIDS has ravaged her body to the extent that she is unrecognizable.

It is clear from the above scenes that Magona’s novel, like Monette’s *Love Alone*, is aimed at the denying reader. Like Monette, through these descriptions, Magona wants to allow the reader “no escape” and seeks to “shock and unsettle him/her out of his or her insensibility about AIDS.”

Her choice of Beauty as the PWA is also a very good one. From what the FFF say about Beauty's sexual and moral conduct of behavior, it is clear that she is the least person to deserve an AIDS infection. In other words, as already mentioned earlier, she is an innocent victim who has not broken any rule of conduct. Ironically, she is the one dying of AIDS. What Magona underscores through Beauty's agonizing illness is that no one is safe from HIV/AIDS infection, the good and the bad alike. Hence the message is clear: "no sex without an AIDS test" and/or "no sex without a condom." Another important consequence of the "gift" that Beauty leaves her friends is that it forces them to evaluate their own relationships with their husbands and/or partners, and all of them demand a change in the way sexual relations between couples are handled. Shortly after Amanda conveys Beauty's message to the rest of the group, all of them insist on doing joint HIV tests with their husbands or partners, and/or using condoms. This news is not taken well by all the husbands or partners. For example, Vuyo reacts by leaving Cordelia, while Amanda and Edith stick with their guns and practice the no condom no sex principle. After a joint HIV test, Doris overhears Selby confessing to his mother how scared he was in case the test turned positive. For Doris, Selby's confession is an admission that he has been gambling with their lives, and for this reason she decides to break off the engagement. Amanda's relationship is also destroyed beyond repair when she discovers that her husband, Zakes, has two "grass" children (children out of wedlock). Although all the FFF find themselves single again after demanding changes in their marital lives, what is commendable is that all of them have become agents of their lives. They have heeded Beauty's call: "ukhule" [ude ukhokhobe].

In *Beauty's Gift*, Magona uses the second Sonti twin's funeral as a platform for HIV/AIDS education, and thus replaces the denial and silence surrounding HIV/AIDS with frank talk about HIV/AIDS and the destruction it leaves in its wake. Unlike the previous two funerals, denial and silence have been replaced with talk and action about HIV/AIDS. This is evident in the way the funeral is organized: "three girls and three boys lined up at the gate to the humble family home. Each held a basket of red ribbons, which they handed out as people walked in." Red ribbons all over the world symbolize the fight against HIV and AIDS. The Sontis "were not only declaring the cause of Lungile's death, they were seizing the chance to educate the community." As if this is not enough, "inside another set of boys and girls handed out pamphlets on HIV and AIDS, as well as other sexually transmitted diseases, along with the programmes." The third and fourth speakers in the funeral perform AIDS activist work, with the third giving a testimonial of her ten-year journey of living with HIV, while the fourth, an old teacher and community leader, Mrs. Mazwi, challenges the youth to take decisive action against HIV/AIDS infection by saying, "let us not beat about the bush, this is your funeral. This is your disease. This is your time of judgment. But it is also your challenge to higher duty." She assured the youth that "we are fortunately not doomed to die," and

issued the warning “Don’t let sex kill you. Use condoms. Stay faithful. Test and test again.” She finished off by telling the youth that “There is no stigma to fighting to stay alive. There is no stigma to illness. If you are ill, you’re ill, not dirty! The stigma belongs to those who gossip.”

THE BOOK OF THE DEAD

Like *Beauty’s Gift*, Moele’s *The Book of the Dead* is another type of AIDS writing by a black author. Typical of a novel about AIDS, it deals with the problem of denial and acknowledges the “dreadfulness of the disease,” mainly counter-immersively although also immersively. In its treatment of Pretty, the first character to be infected with HIV, it does so counter-immersively. As mentioned previously, counter-immersive AIDS writing focuses on characters as speakers who are in various degrees of denial, and treats its readers the way the characters handle their disturbing contact with AIDS, protecting them from too jarring a confrontation with the subject through distancing devices. Pretty’s contact with HIV/AIDS is surrounded with silence and denial. Although she does confide to someone and/or something, her confession to her son, Thapelo, is undermined by the fact that he is so tired after his birthday party that he falls fast asleep while Pretty is talking to him. Thus, the conversation effectively becomes a soliloquy as it does not reach its intended audience. This in itself is a form of silencing because, although she tries to speak about her contact with HIV, her speech is not heard. Pretty also confides to her diary, but as is typical of a diary, no one has access to it after until after Pretty’s death.

Khutso, like Pretty, does not disclose his HIV positive status to anyone except his special diary, which he has bought for the sole purpose of recording the names of those he chooses for revenge infection. An interesting fact about the choice of Khutso’s diary is that it resembles the Bible, with its leather cover and quality paper like parchment. One can infer that its choice is possibly an expression of Khutso’s anger against his Maker/God who has failed to protect him against HIV infection, or the death sentence as Khutso seems to perceive it, which he believes he does not deserve. Indeed, the connection between the journal and the Bible is made when Khutso describes the type of journal he wants to the saleslady at the stationery shop. He describes it as “something leather-covered, like a Bible, with the same quality paper as the Bible’s.” Its resemblance to the Bible is again emphasized when Khutso states that Thabiso’s name is the second one to be written in his “holy book.” These two AIDS narratives show that both Magona and Moele are deeply concerned with the havoc HIV/AIDS is causing, but while Magona seems to accept the colonial stereotype of the promiscuous African male and holds him responsible for the havoc AIDS is bringing on society at large, Moele expresses anger at the havoc of AIDS among the youth, males

and females alike, because of their questionable sexual behavior which Zulu describes as hedonist, materialist, predatory, insatiable, and shallow (56).

The Book of the Dead comprises two parts: "Book of the Living" and "Book of the Dead." As the headings suggest, Part I, "Book of the Living," deals with characters who are full of vitality and dreams of a bright future, whereas Part II, "Book of the Dead," is peopled with characters who are dominated by despair, deceit, desire for revenge infection, and characters who have neither hope nor future to look forward to, with many of them seeing suicide as the only way out. "Book of the Dead" is dark and this is partly because many of those infected with HIV perceive it as a death sentence. Moele's interesting technique in "Book of the Dead" is the use of two narrators: a third person narrator and a first person narrator (the HI virus itself), which uses the first person pronoun "I." The two narrators jointly narrate the events following Khutso's discovery that he is HIV-positive. With the use of the HI virus as one of the narrators, Moele not only aims to shock the reader into taking notice of the devastation caused by HIV and AIDS, but also aims to drive the message home strongly to the denying reader that s/he—like the so-called people at risk: homosexuals, prostitutes, and drug users—is as highly susceptible and at a great risk of HIV/AIDS infection as they are.

While in *Beauty's Gift* it is the man who infects the woman, stereotypical roles of seroconversion are reversed in "Book of the Dead." It is Pretty, the woman, who is responsible for infecting her husband, and is the one who comes into contact with HIV first as a result of rebelling against accepted norms of social conduct by engaging in marital infidelity. According to Jones's classification, Pretty is a deserving culprit because she comes into contact with HIV due to her promiscuous behavior. In this novel, unlike in *Beauty Gift*, it is Khutso the husband who is the innocent victim. This role reversal is interesting considering the double standards that operate in African communities regarding how extra-marital affairs are viewed in relation to men and women. Normally, this behavior is tolerated in males, but it is seriously frowned upon in women. Indeed, the derogative words used to describe women who practice marital infidelity are telling: "bitch," "loose woman," "whore," "prostitute," etc. By contrast, men who engage in similar behavior are described positively or endearingly: "ladies men," "player," "stud," etc. In portraying Pretty's sexual history as questionable, Moele seems to be conscientizing the reader of the changing gender practices currently in place in society today.

In *The Book of the Dead*, Moele creates two narrators who are united by their need for revenge infection aimed at infecting as many people as they can. For Khutso, revenge infection is justified because Pretty infected him with HIV when he did not deserve it; for the HI virus, revenge infection is in the nature of its work as a "predator," work which it admits it loves. That the two narrators

are in sync in their purpose is evident as they jointly begin to record the names of those who are as good as dead.

We were sitting in Khutso's study, both of us pondering the mission ahead, the mission that we were going to undertake together. We are going to fuck 'em dead, I told him, and he smiled.

With *Pretty*, the subject of HIV/AIDS is dealt with counter-immersively. For example, when *Pretty* learns of her HIV status for the first time, she resorts to silence. Although this is painful—she breaks down and cries so hard that she has to stop the car on the side of the road, and is also tempted to commit suicide by driving under the trailer of a truck she is following—as readers, we are still protected from a jarring confrontation with HIV/AIDS itself. Furthermore, *Pretty* dies before the usual symptoms associated with the disease are manifested. Thus, through her, HIV/AIDS is portrayed as a silent killer that stealthily invades one's body, leaving no signs of its presence. Although the news of her testing HIV-positive comes as no surprise to her, she maintains silence and does not even tell Khutso her unpleasant discovery, although she knows he is likely to be infected. Furthermore, the reasons that lead to the deaths of various characters including Thabiso (the second character to make it in Khutso's "holy book"), Nomsa, Reneilwe's mother, and Nonkululeko are hushed and readers are spared from witnessing the pain and agony of HIV/AIDS-related deaths. This is typical of counter-immersion.

By contrast, through *Nkululeko*, the subject of HIV/AIDS is treated immersively. *Nkululeko* is twin brother to *Nonkululeko*, a 23-year-old lawyer who, after witnessing her brother die a slow disgraceful death and her entire family being wiped off from the face of the earth, makes a conscious decision to practice abstinence as a measure to safeguard herself against getting infected with HIV and AIDS. Growing up as children, *Nonkululeko* is totally overshadowed by her twin brother, who is "his mother's prince charming from the moment she had first held him in her arms." *Nkululeko* grows up to be a playboy. Because of his promiscuous sexual behavior he catches HIV, but as the first person narrator (the HI virus) states, "*Nkululeko* thought that he was knowledgeable, that he could outwit my forces, but what he didn't know was that he was already on the front line—and he stayed there for a full four years, a grade-A soldier working for me tirelessly night and day." Out of grief and despair at the prospect of losing their only son, both parents die in quick succession. The father suffers a stroke and dies after four days in a coma while the mother also collapses and dies possibly of grief.

At first, *Nkululeko*'s family responds to the disease by maintaining denial and silence. His contact with HIV/AIDS catches all of them totally by surprise and they become so desperate

that that they even consult traditional healers, practices which are incongruent with the family's Christian belief. The mother, in particular, becomes so desperate for a cure for her son's illness that she pleads with Nkululeko to visit a number of traditional healers who all claim to have the miracle cure for all sorts of diseases including HIV/AIDS. Throughout Nkululeko's struggle with HIV/AIDS, her mother continues to deny the possibility that his son has HIV. Instead, she chooses to believe that he is bewitched by some jealous person because he has a degree, money, and a nice car. In order for her son to be cured, she pleads with him to perform a number of degrading acts, the most degrading requiring him to have sex with a spotless white female goat that has never given birth during a full moon.

Through Nkululeko's mother's desperation and denial of HIV/AIDS, Moele seems to be negating the various myths surrounding HIV/AIDS miracle cures. In their place, Moele's message is clear: Test and test again for HIV. In Nkululeko's case, denial is shown to be a contributing factor to his unnecessary early death. It is portrayed as having prevented him from enjoying a normal, healthy life using antiretrovirals (ARVs). Moele seems to suggest that HIV testing may have saved Nkululeko's life as it would have revealed his low CD count early, which in turn would have qualified him for antiretrovirals, which if used correctly would not only have prolonged his life but would also have enabled him to live a healthy, happy life. The money wasted on Sangomas could have been used to buy ARVs. Thus, the strong message Moele is sending to communities suffering from the scourge of AIDS is a change of attitude towards their view of HIV and AIDS, and this is best summed up in Mrs. Mazwi's words in *Beauty's Gift*, "There is no stigma to fighting to stay alive. There is no stigma to illness. If you are ill, you're ill, not dirty! The stigma belongs to those who gossip." About Khutso's revenge infection, Moele seems to be suggesting that it is indicative of one who childishly feels so wronged, as if the whole world is colluding against him. He thus feels justified to lash out on everyone, and in this case through revenge infection. Indeed, Khutso behaves like a child who throws a tantrum just because something does not happen the way he wants.

However, what Khutso should have done after discovering his HIV positive status is to assume responsibility for his part in his infection by not using protection, and then focus on surviving rather than believing that AIDS is an "automatic death sentence." After all, when he first meets Pretty in "Book of the Living," Pretty lays bare her past and begs him to help her start over again. More importantly, through the infection of a husband who does not cheat in marriage, Moele, like Magona, sends a clear message to sexually active people that the onus for protecting themselves lies with each individual in a relationship. Having trust in one's partner is shown to be an inadequate weapon against HIV and AIDS. Here, both authors advocate agency as the only way individuals can stay protected against HIV and AIDS.

In conclusion, the novels, *Beauty's Gift* and *The Book of The Dead* by Sindiwe Magona and Kgebetli Moele respectively are typical examples of AIDS writing that locate HIV/AIDS among heterosexuals. Both of them deal with the denial and silence that surrounds HIV and AIDS in general, and treat the subject of HIV/AIDS both immersively and counter-immersively. Both books educate the masses about the HIV/AIDS pandemic either by shock treatment or by gently revealing the consequences of reckless behavior on infected individuals and those who care for them. Both books have an empowering message for both the HIV-positive and HIV-negative. For those who are HIV-positive, the books advise confronting the disease rather than seeing it as a death sentence. For those who are HIV negative, the books advise the use of condoms and testing again and again as the way forward. Finally, the decision to stay alive is placed on each individual in a relationship.

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