

The forgotten children of Africa: Voicing HIV and Aids orphans' stories of bereavement: a narrative approach

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Abstract

This article looks at the bereavement of children left orphaned by the HIV and Aids pandemic that is crippling the continent of Africa. Their bereavement is examined by means of the narrative approach and by integrating this approach with the traditional African art of storytelling. By listening to the stories of three Zulu children, the article gives them the opportunity to express their own unique stories of bereavement: stories that would otherwise have been silenced by the wave of bereavement in the wake of countless deaths worldwide as a result of HIV and Aids infection. It looks at the losses these children have suffered, their greatest fears and how their Zulu culture and customs influence their emotional experience of losing their parents. The article shows how they can – by means of storytelling – reformulate the story of their lives and find the proverbial pot of gold at the end of the rainbow.

1. INTRODUCTION

A man named Tshintsha owned a garden situated along a riverbed. One rainy morning he went outside to watch his garden during the rain. When the rain cleared up, a rainbow (*umnyama*) descended into the river. All of a sudden it came out of the river and into Tshintsha's garden. When he saw the rainbow coming closer to him, he became afraid and tried to run away. It dazzled him and struck his eyes with a red colour. Men say that a rainbow is a disease, if it rests on a person some illness will befall him. Struggling to see, Tshintsha ran from his garden with the rainbow

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still chasing him. Because the rainbow poisoned him, he developed swellings on his body and became very ill. He decided to leave his family to undertake a journey in search of a rainbow doctor, in an effort to rid himself of the poison of the rainbow.

(Adapted from Canonici 1993:58)

This Zulu story of a man called Tshintsha being poisoned by a rainbow might seem incredible to most readers. How, you may ask, can a rainbow inflict a disease as deadly as this one? Yet today millions of people around the world are also being poisoned by the *umnyama* – just like Tshintsha. Unbelievable? We live in a world ravaged by the onslaught of the *umnyama*, better known to most as the HIV and Aids pandemic. From a Western perspective this story is just that – a folktale. But from a more traditionally inclined African perspective, this story might make perfect sense in relation to the prevalence of HIV and Aids in African communities.

Orally transmitted myths and folktales of African people, such as *Tshintsha and the rainbow*, are based on human experience. They tell of people's "... wrestlings with the mysteries of existence, life and death." These tales are the products of African people's reflections on "... the relations among humans, ... responses to the challenges of the unknown, and to the universal need to create order and reason out of chaos and accident" (Courlander 1975:1).

This story incorporates the African worldview on illness and death, with its reference to the negative impact a natural phenomenon such as a rainbow is believed to have on people. Even if Africans may know that an illness is caused by a micro-organism that can be explained from a medical point of view (such as the flu virus), they explain and understand illness and unnatural deaths (from diseases such as HIV and Aids) in the light of their worldview (Ngubane 1977:23).

What this story does not go on to tell us, is that Tshintsha died while he was away, but before he left he infected his wife as well. Later she also died, leaving their children behind – grieving for their dead parents and fearing this monster (*izumu*) who had taken them away.

This research is part of a journey to try and find these scared, grieving children and to help them voice their stories of bereavement. The method used was to ask three Zulu children who had been orphaned by HIV and Aids in the rural area of Tugela Ferry, KwaZulu-Natal, to tell their individual stories.

2. A POST-MODERN WORLDVIEW IN THE CONTEXT OF AFRICA

Post-modernism has its roots in the French school of literary criticism known as “deconstruction” (Erickson 1998:18), and influences all spheres of life – as can be seen in new architectural designs and even in literature. When we deconstruct certain discourses, we listen to what is not said (Drewery & Winslade 1997:43).

In examining how the post-modern worldview relates to the African context, we can refer to White and Epston (1990:35) who state that: “... it has been demonstrated that independent knowledge can exist in a community and be passed on by other means [than writing], including through the art of storytelling and through the medium of song and dance.”

It is this independent knowledge of the African people that is employed in this article, by making use of the art of folktales in an attempt to gain a better understanding of how Africans view the world. This is attempted without disregarding the post-modern worldview, but instead trying to integrate the two worldviews where possible.

The social-constructionist paradigm was used as a vehicle on this journey. The post-modern paradigm is also sometimes referred to as the social-constructionist paradigm (Müller et al 2002:2). Characteristic of the post-modern era is its “... shifting values and an increasing respect for personal meaning” (Mills et al 1995:368).

Mills et al (1995:370) go further by describing reality as a product of relationships with other people, a description which coincides with the view in post-modern philosophy that knowledge is dependent on language, social practices and social relationships (Popp-Baier 2002:42). This links up with the Zulu concept of *ubuntu*, which means that a person is only a person through other people (Landman 2002:270). In this way – as Mills et al (1995:370) refer to it – social constructionism is grounded in a “philosophy of community.”

3. USING THE NARRATIVE APPROACH

*We all have stories, we just lack listeners.
Reverend Jackie Sullivan*

White (1993:36) proposes in his discussion of the narrative metaphor that all people, adults and children alike, live their lives by stories. These stories are what he calls the “... shaping of life, and they have real, not imagined, effects – and these stories provide the structure for life” (White 1993:36). All children

love stories and there is no better way to get children to open up and tell their own stories than by using the stories they know and love.

Since the narrative approach focuses on the personal meanings that people assign to specific events in their lives and how they tell the story of these meanings, reality is furthermore defined by the stories people live by and therefore tell one another (Mills et al, 1995:373).

Folktales are regarded as collective stories in a particular culture. According to Msimang (1983:1), Zulu folktales or *izinganekwane* are still "... a living art which expounds and upholds certain Zulu norms and values ...". Tales such as *Tshintsha and the rainbow* tell of man's confrontation with what is seen as the supernatural and unseen forces of nature (Courlander 1975:3).

In this way, these tales communicate the scope and nature of our common identity, for example the universal fear of illness and death and also the human experience of grief and bereavement (Courlander 1975:1,2). Yet at the same time these tales are unique to the people the tales are about and to whom they are told (Courlander 1975:3). No wonder the art of storytelling and the legacy of folktales are deeply revered in the African tradition.

Msimang (1983:21) adds that "... a folktale in its proper Zulu context is never related unless there are children around." Adults are often part of the audience too. Members of the audience have to involve themselves in the narration of the *izinganekwane* by actively participating and contributing to the story (Msimang 1983:194).

In much the same manner as recounting an *izinganekwane* in the Zulu context, this research attempted to reflect the "participatory interaction" among all the people involved, where the researcher embodied the dialectics between the perspectives of the "insider" and "outsider" (Müller et al 2002:2). The children became the storytellers of their life stories, because they were the experts on their own lives (Müller 2000:56) and we, the researchers, formed part of an interested and involved audience to these stories as they evolved and took shape.

The researchers are therefore neither complete outsiders by being observers, nor are they insiders who are fully involved in the process. Instead the researchers are interested participants in a part of the process, who want to "be faithful to the story as told by the research participants giving voice to their lived experience" (Freedman & Combs 1996:21).

4. WHERE HAVE ALL THE CHILDREN GONE?

4.1. Beginning the story – at the beginning

We pick up the story where Tshintsha's children have been orphaned. Both their parents died within a short time of each other, leaving the children alone and at the mercy of others. Grief-stricken and fearing this *umnyama* who had

poisoned and ultimately killed their parents, the children feel uncertain about what the future holds for them.

The chosen research area was the bereavement of three HIV and Aids orphans in the Tugela Ferry district of KwaZulu-Natal. The reason for selecting these children was the statement by Kübler-Ross (1970:157) that children in general and African children in particular (Malherbe 2004 & Maseko 2005) are often the “forgotten ones” when it comes to death and bereavement.

The Bonaero Park Dutch Reformed (NGK) Church in Kempton Park is involved in what is called the Tugela Ferry Outreach Programme, in conjunction with the Tugela Ferry Mission Church. The Mission Church is also deeply involved in the Izintandane Orphan Project, aimed at identifying and assisting HIV and Aids orphans. Through the church, contact was made with Elzeth Malherbe, who heads the Izintandane Orphan Project. She is assisted by Mary Mahlangu, who is responsible for the Home-Based Care Project, aimed at assisting HIV and Aids sufferers and their families and providing counselling to those in need.

Elzeth and Mary identified the three children, whose stories are told in this article, as having been orphaned as a result of HIV and Aids. Since Mary is involved with the Home-Based Care Project and works directly with the children before and after their parents’ death and is involved with counselling, she became the field co-researcher for this research.

To maintain confidentiality, the children were asked to choose a Zulu name which had some special meaning for them. S’thembiso (Faithful) is 10 years old and Nobuhle (Beautiful) is 7 years old. They are brother and sister and they also have a younger brother, aged 3 years. They live near the Tugela Ferry Mission Church with their paternal uncle and aunt, and some of their younger cousins. Nomusa (Graceful) is 17 years old and lives with two of her siblings in Msinga in a child-headed household.

S’thembiso, Nobuhle and Nomusa are what is referred to in the literature as “double orphans” (Barrett & Whiteside 2002:200), because both their parents became infected by an illness related to HIV and Aids, and died within a couple of months of each other. Little more than this is known about the deaths of Nomusa’s parents.

The father of S’thembiso and Nobuhle contracted HIV and Aids through sexual intercourse with a woman other than his wife. After a long illness and after infecting his wife too, he died in August 2003 of an illness related to HIV and Aids. Then the children and their mother returned to her parents and family, where she was cared for until her death in February 2004. The children were exposed to the effects of illnesses related to HIV and Aids for a total of

between 12 and 18 months. It was feared that the youngest child might have contracted the disease through mother-to-child transmission, but fortunately his tests were HIV-negative.

After the death of both their parents, their father's eldest brother came to their mother's family and took the orphans into his own household. At night he works as a security guard at the Izintandane Orphan Project. He is a Zionist and also an elder of his tribe and is strongly traditional regarding the Zulu culture. As the oldest brother, he has an obligation to care for his brother's children. One of the Zulu customs is that the children should remain part of the paternal family. According to Zulu tradition, the oldest brother also inherits everything when the children's father dies, so that he can look after his extended family (Malherbe 2004).

Although also a Zulu, Nomusa and her siblings were not as fortunate as S'thembiso and Nobuhle, whose extended family come to their rescue. Instead Nomusa and her siblings were left to fend for themselves.

S'thembiso and Nobuhle suffered deep emotional distress after seeing both their parents die over a long period of time and so soon after each other, but the fact that their extended family now cares for them makes a world of difference to their stories. Life for S'thembiso and his sister Nobuhle is now about adjusting to their new home and their new family.

In stark contrast to Nomusa's experience of adjusting to another (smaller) house, greater responsibility and fewer family members around, S'thembiso and Nobuhle still have time just to be children. They can play with each other and forget, if only for a short while, about the terrible trauma and loss they suffered.

4.2 In a place where time is measured by nature's change

South Africa is home to many worlds. Driving through the country – from Johannesburg to Durban – you will probably encounter many different ways of life. You may see any lifestyle you can think of, from the high-flying lives of the rich and famous in suburbs such as Sandton, to the dire poverty in the nearby township of Alexandria.

Our journey in search of these HIV and Aids orphans took us to the rural area of KwaZulu-Natal, where time is measured according to the natural cycle of life and death and the agricultural seasons of planting and harvesting (Floris 2002:8).

The surroundings we travelled through on our journey in KwaZulu-Natal had many striking contrasts, ranging from the sight of lush green sugar plantations, wealthy suburbs and rich people's holiday retreats to informal settlements near the road, generally on a dusty patch of land with few or no

trees in sight. The dwellings can barely withstand the elements and shelter their residents – dwellings which people call “home”. People live out their lives within these walls made of corrugated iron. They share one another’s joys and sorrows – just as we do in our brick-and-mortar houses with their landscaped gardens and elegant water features.

This arena in which our story is told, is a reflection of the society in which we live. Children are orphaned daily as a direct result of HIV and Aids in places like these, yet most of us choose to drive past these settlements and turn a blind eye to their needs and their suffering. In such a scenario, we ought to heed Christ’s words (Mt 19:14): “Suffer the little children to come unto Me and forbid them not.”

4.3. Challenges faced in interacting with and participating in the action

When we as researchers started out on this research journey, we faced a three-fold language barrier, which had to be overcome to do justice to this research.

Firstly, there was the issue of the literal language barrier. As Afrikaans-speaking South Africans we were unable to communicate independently with the chosen co-researchers in their mother tongue – isiZulu – and they could not communicate effectively in English because of their age and social circumstances. Consequently we needed a field co-researcher to conduct the conversations with the children in isiZulu and then translate it for us.

Secondly, there was the issue of a cultural language barrier. Being white South Africans from a middle-class urban background, our circumstances were worlds apart from the circumstances of the co-researchers and their life experience. These rural African children live in the direst poverty, and their lives are embedded in their unique Zulu culture. Once again the field co-researcher, with her familiarity with the Zulu culture and customs, helped us bridge these differences.

Thirdly, there was a kind of emotional barrier. Adults often have difficulty with understanding the lived experiences of children and how children relate to the problems they face. In an attempt to solve this problem, the researchers wrote letters addressed specifically to the children. The letters were written in English, then the field co-researcher translated them orally into isiZulu and read them aloud to the children. Throughout the research, we also tried to incorporate the children’s perspectives by means of stories and terminology, such as referring to their problems as a monster or *izumu*.

5. IMPACT OF HIV AND AIDS *IZUMU* AND DEATH ON CHILDREN

5.1 HIV and Aids orphans: The sad story of statistics

Africa is said to have 70% of the world's Aids sufferers and 83% of the world's Aids-related deaths (Swanepoel 1999:3). Since the high incidence of HIV and Aids infection among adults in Africa can be attributed mainly to unprotected sex between men and women (Van Dyk 2001:60), it is no wonder that Africa also has 95% of the world's Aids orphans (Swanepoel 1999:3). These young adults are "jumping the queue" (Van Dyk 2001:62) in their time of death, or as Overberg (1994:3) puts it: "A generation of young adults is dying before its time, leaving many children orphaned ..."

The situation is no better in South Africa. Of an estimated population of 42 million, 3,6 million had already been infected in 1999, and an estimated 550 000 cases were expected to be added to this total each year. There were approximately a million Aids orphans by 2004 in South Africa alone (Swanepoel 1999:3) and the number of these orphans is expected to rise to two million by 2010 (Landman 2002:270).

The Msinga district of Tugela Ferry, which is home to Nomusa, S'thembiso and Nobuhle, lies in the Midlands region of KwaZulu-Natal. A study by the ministry of health in 1998 estimated that between 197 000 and 250 000 children would have been orphaned by 2000 (Michael 2001:23). This figure could rise to 750 000 orphans by 2011 (Pienaar 2001:4).

These statistics are shocking by any standards, yet most of these statistics are outdated by the time they reach the news media. Barrett and Whiteside (2002:199) state in this regard that the bare statistics are troubling and that these statistics "... tell of a generation of children deprived of their childhood".

The question is – are we hearing their cries? We should not be daunted by the overwhelming statistics and seeming hopelessness of the situation. Instead we ought to listen closely, for although these children all share the same fate – they have all been orphaned as a result of HIV and Aids – they each have a unique story to tell to the rest of us, because as Overberg (1994:1) states: "Aids is *our* disease, a disease of the human family."

As explained above, death and birth – from an African viewpoint – are regarded as being associated with pollution (Ngubane 1977:77). Only adults are present at a burial; the children must be kept elsewhere with another adult. After the burial, the mourners have their heads shaven or at least a lock of their hair cut off. This hair is burned together with the deceased's clothes in an attempt to cleanse themselves from the pollution of death. Afterwards the

mourners all take part in a feast. A goat or an ox is slaughtered for the occasion and the festivities commemorate the deceased's life (Maseko 2005).

Malherbe (2004) notes that Zulus do not work through the death of a loved one emotionally, but instead involve themselves in the funeral rituals surrounding the actual burial. The purpose of this ritualistic behaviour is to protect people from becoming too emotional and so the Zulus divert the focus "... from the unpleasant experience to a complexity of ritual behaviour" (Ngubane 1977:82).

Where possible, children are kept away from an ill or dying person, and excluded from the rituals surrounding the burial of the deceased, even if the deceased are their own parents. While the burial is in progress, the adult who looks after the children is supposed to tell them what is happening. A few days after the burial, one of the elders takes the children to the graveside where each child has to place a stone – in remembrance of the deceased – on the grave (Maseko 2005).

No emotional assistance or counselling is given to either adults or children. Once all the burial rituals have been fulfilled, the grieving process is regarded as completed (Malherbe 2004).

5.2 How children tell the story of the experience of death

According to Dane (1994:23), "[t]here is a widespread belief that children are not concerned with death". Killian and Perrot (1994:10) state that people believe children should be protected from death itself. Perhaps this belief that children should be protected from the experience of death sustains the belief that death does not trouble children.

Killian and Perrot (1994) therefore propose that some background information on children's understanding on illness and death is needed in order to "... understand the child's concerns and to help them to deal with their emotions" (Killian & Perrot 1994:10). Jean Piaget formulated a theory of child development from infancy to adulthood. In accordance with this theory, Killian and Perrot (1994:10) state that the child's reaction to and understanding of these issues will depend on which of these developmental stages the child is undergoing.

However, before continuing, it should be stated that in our unique South African context, psychological services for Africans were poor prior to 1994 and as a result, white psychologists had little contact with their developmental problems (Dawes & Donald 1994:6). This is not to say that the development of Africans differs much from that of their Western counterparts; they all go through Piaget's developmental stages but "... children from

‘modern’ societies tend to pass through them more rapidly than children from more traditional societies” (Killian & Perrot 1994:11).

5.2.1 Neonatal phase and the baby years

This stage refers in a wide sense to the first two years of a child’s life (Louw 1996:157). One of the most important developmental tasks a child of this age has to master, is the emotional communication that the child has to develop with his / her parents and siblings (Louw 1996:158), especially with the primary caregiver, which is most often the mother.

In this first phase of a child’s life, the child experiences the death of a parent as separation, as something which brings distance between the child and his / her primary caregiver.

5.2.2 “Where is our mommy?” – the toddler phase

Q: Another reason why you love your younger brother ... what does he talk about?

A: He always asks me where our mommy is.

Q: And what do you tell him then?

A: I tell him that she is in Johannesburg.

Q: Does he cry when he asks where your mommy is?

A: No, he doesn’t cry.

(The above questions and answers indicate the understanding that the 3-year old brother of S’thembisio and Nobuhle has of their mother’s death.)

The toddler phase stretches from about two to six years of age (Louw 1996:243). The emotional developmental task in this phase includes the child’s increasing ability to recognise the emotional reactions of parents and siblings. This means that the toddler will interpret the mother’s tears at the death of the father as a feeling of sadness.

Siegel and Freund (1994:44) agree that as children progress from the age of three to six years, they begin to gain a limited understanding of death. However, they generally do not regard death as final, and see it as reversible and often similar to sleep. Webb (1993:4) contends in this regard that “[t]he young child also cannot comprehend the irreversibility of death”.

Toddlers may even believe that the deceased parent might return to them at a future time (Siegel and Freund 1994:44); for example, from Johannesburg where the above responses indicate the young child believes his mother to be. The fact that he does not cry or seem upset when he asks about his mother, might be “[b]ecause young children have a short attention span, [and] their sadness or pain may go unnoticed” (Dane 1994:23). Children

of this age may realise the reality of a parent's death, without necessarily grasping its long-term effects, namely that death is permanent and irreversible.

5.2.3 “A lion took my mommy away”: Latency age children

The period between the ages of six and twelve years is commonly known as the latency phase of childhood (Louw 1996:326). Siegel and Freund (1994:44) state that by the age of seven to eight years, children have the capacity to begin to grasp the finality of death. Therefore by the time children of Nobuhle's age (7 years) go to school, they should have some idea of what death entails (Holland 2001:50).

By the time children reach S'thembiso's present age – ten and eleven years – they are able to understand the causes of death and see death as “... final, inevitable, and the abrupt stopping of bodily activities ...” (Siegel & Freund 1994:44).

The development in children's understanding entails a concomitant development in their fears. Starting with anxiety because of separation (neonatal phase), progressing to a fear of mutilation (toddler phase), this development ultimately leads to a fear of death itself (Holland 2001:50). S'thembiso puts this fear of death into the following words: “Yes, I am scared of the lion [*death*], because it might take me too.”

Siegel and Freund (1994:44) add that older latency-age children may often experience an inner struggle with the circumstances of the parent's death. The way in which the parent contracted HIV and Aids, whether through drug use, or as in the case of Nobuhle's and S'thembiso's father through sexual intercourse with a woman other than his wife – may lead to issues of morality and ethics for these children.

Although S'thembiso said he had no idea what death was or why his parents had died, it is interesting to note that the Zulu name he chose for himself in telling his story actually means “faithful” and, when asked why he chose that particular name, he replied it was because he wanted to be faithful – something his father clearly had not been.

5.2.4 “My parents died of TB”: Adolescence

Louw (1996:393) states that adolescence begins between the ages of eleven and thirteen – at the onset of puberty – and lasts until the ages of seventeen and twenty-one years.

Although the adolescent generally finds this a difficult developmental stage (Louw 1996:363), there is not much difference between the way that adolescents and adults experience death (Kübler-Ross 1970:158). Holland

(2001:50) agrees with this point, stating: "... by the age of 12 years, they will probably have an understanding of death close to that of an adult." So it is clear why Nomusa was able to tell the story of the cause of her parents' death, whereas Nobuhle and S'thembiso had difficulty doing so.

Yet the death of a parent in this developmental stage may sometimes be too much to handle, since the adolescent has so many other issues he/she has to work through in order to function optimally as an adult. Zayas and Romano (1994:59) mention in regard to adolescents, such as Nomusa, who have lost their parent(s) to the HIV and Aids pandemic, that there is "[p]erhaps no group of children in modern times [that] has been battered by the combination of social and familial decay and a devastating illness, coupled with the normal storms of adolescence". These writers conclude that "[t]his group of youngsters may be the most damaged survivors of the Aids pandemic" (Zayas & Romano 1994:59).

6. UNITED WE STAND AGAINST THE HIV AND AIDS *IZUMU*

6.1 Unravelling and retelling problem stories

In discussing the role of the Zulu folktale, the performer Msimang (1983:136) states that he "acts not only as an entertainer but also as a social critic". As researchers, we took on the role of Zulu folktale performer and also became critics of the discourses that so far had an influence on the folktale or story we were engaged in creating. Laird (1998:437) states that we first have to "unstory" or unravel these discourses so that we can make sense of the story evolving from its different parts.

The following discourses were identified from the previous chapter and the stories the children told about their bereavement.

6.1.1 The lion took more than a mommy: Multiple losses

Children are dependent on their parents for providing in their needs, both physical and psychological (Siegel & Freund 1994:44). When the ultimate loss, the loss of both parents (Dane 1994:13) occurred, Nomusa, S'thembiso and Nobuhle grieved for more than just their dead parents.

Nomusa expresses these losses as she tells of her life before her parents died: "When mother has harvested, father goes with the vehicle to Muden to order potatoes and cabbage and tomatoes to sell at Pomeroy. When they were sold he comes back bringing clothes and schoolbooks and something nice."

Crewe (2001:12) comments that children who have lost one or both of their parents to HIV and Aids, slowly have less and less, until eventually "...

they're destitute in every sense: emotionally, economically and in terms of community."

6.1.2 Lack of emotional support

Gail Johnson (Swanepoel 1999:3) notes that certain children who had lost their parents to HIV and Aids seemed numb and virtually devoid of emotion after the death of their parents – they were beyond all emotion. Schoeman et al (2002:467) comment about a statement such as the one above by Gail Johnson, that there is a need for more personal counselling that would address universal fears and needs.

Schoeman et al (2002:467) mention the importance of acknowledging the powerful discourses playing a role in these HIV and Aids crises, and comment that the training the State provides to these counsellors ought to bear in mind the African way of thinking.

Just as Western ways of trying to inform and prevent the spread of the HIV and Aids virus are doomed to fail in an African context (Van Dyk 2002:65), so too will Western ways of grief counselling fail. What should be remembered is that African people are greatly influenced by their culture, and this has to be kept in mind when attempting to reach out to them emotionally.

Ngubane (1977:82) asserts that the emotional stresses people experience when a loved one dies, may cause permanent damage to their mental well-being. For this reason, the bereaved might prefer to ignore the emotional side of grief and focus on the rituals their culture prescribes.

The African people's view of emotional issues has to be acknowledged, and incorporated through the use of stories into grief counselling – especially where children are concerned.

6.1.3 Facing fears

Children respond to the loss of a parent with a heightened sense of vulnerability, "... often marked by fears of recurrent tragedy" (Siegel & Freund 1994:43). Dane (1994:16) states that children have a "... struggle of living with fear" in reaction to the loss of a parent.

When talking with S'thembiso, it became clear that he felt an overwhelming fear –

Q: Maybe the sadness scares you?

A: I feel afraid and then I think of an *izumu*.

Q: How big is this monster/animal?

A: A lion!

Q: A lion – do you think it is a lion that took your mommy away?

A: Yes, I am scared of the lion, because it might take me too.

6.2. Ziyaxoxa izingane: Children telling stories

There was this little boy who had no mother and father. The other children did not like him. He sat there crying. Then a dog came and sat with him until he stopped crying. It never left his side. The dog thought the little boy had no one to look after [him], so it could sit with him.

(Nobuhle, 7 years)

It [the cat] would crouch behind the grass, then jump for the lion, fight until it kills the lion. Because a cat is not scared of anything, he would puff up the hairs behind his neck, spit, then jump behind a little bush waiting for the lion to come. He'll then jump for it – fight – then kill it [the lion]. He thinks it is a bad lion that eats people so it must die.

(S'thembiso, 10 years)

It's the story of the rabbit and the lion. The lion told the animals he could ride a lion. The other animals didn't believe him, so he went to the lion and groaned. He told the lion he had a stomach-ache. He said he had a very important meeting to go to, but he couldn't walk. He needed the lion to help him to the meeting. The lion agreed and when they came to the animals, they all stared [as] the rabbit was hitting the lion. All the animals laughed and the rabbit ran into the hole. The lion was beaten.

(S'thembiso, 10 years)

Without realising it, Nobuhle and her brother told a great deal about their own stories and their bereavement through the stories they chose to tell. In this way they successfully externalised (Freedman & Combs 1996:95) their sadness (Nobuhle) and fear (S'thembiso).

7. WEAVING IT ALL TOGETHER

Like the different threads the traditional African women weave together to form a beautiful new piece of cloth, this is where we see what shape each child's story is starting to take.

The following is an excerpt from a letter written to S'thembiso as his story was starting to unfold:

Hello S'thembiso

Thank you for the story about the rabbit who fooled the lion and made the other animals laugh at the lion for being so dumb to believe the rabbit when he said he had a tummy ache, and if the lion would mind helping him to get where he was going. I laughed so much when I read it, because it is so funny.

Didn't you think the story was funny? How such a little animal such as a rabbit could fool this big and strong lion into believing him? I think you were right – the rabbit is indeed clever.

Did you see that in both stories you told, it wasn't the big and strong lion who won the fight? First it was a small cat who outsmarted the lion and managed to kill him, and then in the next story the rabbit fooled the lion.

Sometimes you don't have to be big and strong to win, but you must be clever. And I think you are a very clever boy. Do you think that if you try really hard, you could fool this lion you are scared of? So that he wouldn't be able to take you away too? I think you can!

I would like to hear if you have any suggestions on how to outsmart this lion, since I think you would be able to come up with some great ideas! Since you are so clever and the lion is not! I mean – if a rabbit can fool a lion, I think you would be able to do it too!

Amanda.

8. AT THE END OF THE RAINBOW

When it rains, at the appearance of the rainbow men say: "It is going to clear up, for the bow of the queen, the rainbow has appeared." And it does clear up. Even though it rained heavily, it clears up at the appearance of the rainbow, it rains no more. Even when it has rained for two days, the sky clears up when the rainbow appears.

(Canonici 1993:58)

This article began with the Zulu story of Tshintsha and the rainbow and how the traditional African worldview influences people to fear the unseen powers of a natural phenomenon such as a rainbow. But now we have a contradictory story, and it is in the same Zulu tradition. How is it possible to have two opposing stories about the same phenomenon?

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Why the difference? Why is the rainbow no longer seen as the source of pollution and disease, but as a necklace of a queen or a princess?

If we want to use narrative language, we could say that a sparkling moment has occurred. The story of need and a future story that had dark clouds looming over it (Müller 2000:72, 73) have been retold and reinterpreted to make a new and exciting story – which gives hope for a brighter tomorrow for these children.

Ever since biblical times, Westerners have seen a rainbow as a universal symbol of hope, of a fresh start after a bad storm. Great emphasis is placed on the positive role of the rainbow in the biblical story of Noah and the ark (Gn 9). As South Africans we are all part of a “rainbow nation”, where there are no differences of colour or creed. As such we have an obligation to look after our children as the princes and princesses of this nation, who wear this rainbow as a symbol of hope for the future – our future.

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