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EDUCATIONAL DECISION-MAKING IN  
AN ERA OF AIDS: EXPLORING THE  
NARRATIVES OF AFFECTED YOUNG  
ADULTS IN THE CAPE FLATS

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CSSR Working Paper No. 191

May 2007

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Acknowledgements:

I would like to acknowledge funding from the National Institute of Child Health and Development and the National Institute of Aging (Grant R01 HD045581-01).

# Educational Decision-Making In An Era Of AIDS: Exploring The Narratives Of Affected Young Adults In The Cape Flats

## Abstract

*This paper analyses how HIV and AIDS affects decisions around education. Data was collected through in-depth interviews with eight young adults, as part of a larger study into educational decision-making among young Black African adults in general. Results indicate that HIV and AIDS heighten psychological problems including stress, insecurity and anxiety, as identified by psychological research. HIV and AIDS add an extra layer to the already existing complexity and fragility of young people's lives and worlds. But no evidence was found that affected young people would more readily make negative decisions about education, or would orient their values, attitudes and behaviour towards the short- rather than the long-term. The AIDS-affected young people in the sample shape their identities by focusing on future success, albeit within a world characterised by fragility, in ways that are similar to non-affected young people. Positive educational decision-making is clearly an integral part of those young people who choose to regard their current situation of deprivation as temporal and to use education as a vehicle towards future success.*

# Introduction and Background

Numerous studies have indicated the profound and rising impact of HIV and AIDS on children and young adults' lives. This paper is concerned with the pandemic's consequences on young people's education. It explores young adults' educational decision-making in a context of HIV and AIDS, focusing especially on the potential impact of the disease on the way in which young adults perceive the value of education. It should read as the second part of an overall analysis of young people's decisions around education, with the first part being a base line exploration of non-affected young adults' narratives on the topic (De Lannoy 2007) and the third part being an analysis of relevant survey data (forthcoming).

Similar to the first paper on young adults' educational decision-making, this study aims to understand:

- How young, Black African adults in an urban setting make decisions around their education:
  - a. How do they understand the value of education?
  - b. (How) do they act upon that value? i.e. what role (if any) does the perceived value of education play in their decision-making about education?
- How HIV and AIDS impacts on that decision-making process.

The focus on HIV and AIDS in this second paper stems, in the first instance, from the concern around the sheer number of affected young people and their access to services as education. There is no unambiguous definition in the AIDS-related literature of what exactly 'affectedness' means, but in their work around Human Rights and HIV and AIDS, Gruskin and Tarantola have, for example, stated that 'people are affected by HIV and AIDS when their close or extended families, their communities and, more broadly, the structures and services that exist for their benefit are strained by the consequences of the pandemic and as a result to provide them with the support and services they need' (Gruskin and Tarantola 2002: 3). A more concrete description of 'affectedness' can be found by looking at the definition of 'vulnerable' children and young adults, a term often used interchangeably with 'affectedness as a consequence of HIV and AIDS' (Richter, Manegold et al. 2004). Categories of vulnerable children and young adults that found in the literature are: children and adolescents orphaned as a consequence of the disease; those who live in a household where one or more members are ill, dying or deceased as a result of the disease; children and young adults in households that are fostering one or more orphaned child(ren); children whose caregivers are ill, too frail, or too old

to truly care for them (ibid). Some also explicitly include those children that have an increased risk of becoming HIV-infected, and those that live in a non-affected household within a heavily affected society (Ebersöhn and Eloff 2003)<sup>1</sup>. Hence, in countries as South Africa, with high levels of HIV-prevalence, young people are affected in a myriad of ways.

Exact data on all these types of affected young people is not always easy to come by. In South Africa, the ASSA 2003 model indicates that more than five million people (approximately 11% of the entire population) are living with HIV, and an estimated 11% thereof are in WHO stage four of the disease<sup>2</sup>. Among young adults between the ages of 15 and 24, HIV prevalence is estimated to be approximately 10%, but with a much higher prevalence among female youth (16.9%) than among male youth (3.7%). It is further estimated that the incidence rate<sup>3</sup> among young adults was close to 3 % in 2006; among young women between the ages of fifteen and nineteen, incidence rates are estimated to have been as high as 4.2% in the same year (data from the ASSA 2003 model; UNAIDS 2007). Calculations based on the full ASSA 2003 model indicate that of all young adults infected with the HI-virus in 2006, approximately 52% were in the first stage of disease, 23% and 21% in stages two and three respectively, and 2.5% in stage four (not on treatment). Approximately 1% of all young people living with HIV are on antiretroviral treatment (data from the ASSA 2003 model). In the Western Cape Province, numbers are lower than in any of the other provinces, with a prevalence rate of about 4% among youth aged 15 to 24, and an incidence rate of just over 1. However, the proportion of youth in the different clinical stages is very similar to the national level, yet with 2.3% of infected people on antiretroviral treatment (data from the full ASSA 2003 model).

According to the South African government's report on 'Mortality and causes of death in South Africa', comparing number of deaths in 1997 and 2002, there was an increase in deaths among the 15 to 24 year olds of more than 55%, part

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<sup>1</sup> In the context of working towards a generally accepted definition of vulnerability, many point to the necessity of not losing sight of other groups of vulnerable children, including also 'the internationally recognised categories of street children, children exposed to strenuous labour, children engaged in sex trafficking, commercial sex work and children affected by armed conflicts' (Unicef and World Bank 2002). However, for the purpose of this paper, I will restrict myself to the category of children young adults who are considered affected or vulnerable in the context of HIV and AIDS.

<sup>2</sup> The WHO staging system of the disease includes four stages, with infected people in stages 1 and 2 being relatively asymptomatic, those in stage 3 showing symptoms as recurring diarrhoea, weight loss, and infections of mouth and throat, and those in stage 4 being AIDS sick, showing symptoms as pneumonia, extrapulmonary TB and wasting (WHO 2005).

<sup>3</sup> Prevalence rate refers to the estimated proportion of people who are infected with HIV, at any given time; incidence rate, on the other hand, refers to the new cases of HIV-infection diagnosed each year (Dorrington et al. 2002)

of that undoubtedly due to the AIDS pandemic (Statistics South Africa 2005). Data on orphaned young adults in the complete age group 14-25 is scarce, since 'orphans' are usually defined as children below the age of eighteen 'who have lost either or both parents from any cause' (Subbarao and Coury 2004: 6; see also for example UNICEF and World Bank 2002; Children's Institute 2001). An estimated 1.2 million children below the age of eighteen are believed to have lost one or both parents to the pandemic (data from the ASSA 2003 model). It is generally believed that the chance of being orphaned as a consequence of the pandemic rises with age, as 'AIDS kills parents in midlife after an incubation period of eight to ten years' (Subbarao and Coury 2004: 22). In the Western Cape, orphan rates do indeed increase with age - estimates for 2006 showing approximately 1% of maternal orphans among two year olds, compared to close to 8% among fourteen year olds, and 9% among seventeen year olds (data from the ASSA 2003 model).

Documented socio-economic consequences of the pandemic on children and young adults range from increasing poverty levels of the households they reside in, increased demands on the children to take on caregiving and income generating roles, migration following the loss of a parent or primary caregiver, to decreased access to health care and education, etc. (Bray 2003; Case and Ardington 2004; Van Blerk and Ansell 2005; Giese et al. 2003; Subbarao and Coury 2004; cfr. Also household level studies as Booyesen et al. 2003 and Steinberg et al. 2003).

More particularly, however, the topic of this study emanates from a concern with hypotheses that hold that the AIDS pandemic might potentially impact on people's educational decision-making, not only through its consequences on individuals' and households' economic resources, but also by impacting the more *subjective spheres of decision-making, i.e. values, attitudes and beliefs in the future*. One example of such thinking is Barnett and Whiteside's (2002) belief that 'The shorter the time frame that people have, the more short-term risks they take with their health and the less willing they are to risk their limited assets which must be used for short-term survival. They are unwilling to invest in their future', and therefore also in education (ibid: 273). Similar hypotheses can be found in, amongst others, economic modelling by Bell *et al.* (2004) who presumes parents will no longer be interested in investing in children's education. Further, concerns about the state of democracy and internal security in South Africa can be found in, for example, De Waal (2002), Mattes (2003), Schonteich (1999), etc., with most of these expressing concerns about the development of anti-democratic and anti-social values and behaviour among affected and orphaned children and adolescents.

There is, however, a general lack of evidence for these claims (as Bray 2003 observed; see also De Lannoy 2005). Indeed, the sociological and school-based literature tends to suggest the opposite, i.e. that AIDS-affected people maintain a strong commitment to education in the face of, and perhaps because of, AIDS. Some indication of this can be found in household studies reviewed in earlier papers (De Lannoy 2005). Booysen et al. (2003), for example, mention that one of the most important reasons for people selling their assets is the fact that they want to be able to pay for their children's school fees. Steinberg et al. (2002) state that many families hesitate to scratch school fees off the expense list, even when they are actually no longer able to afford them. In their study on children affected by HIV and AIDS in Malawi and Lesotho, Van Blerk and Ansell (2005) note that guardians in both countries try everything possible to maintain the education of those children under their care. Also, the Children's Institute indicates that many of the vulnerable and orphaned children in their sample of research go to great lengths in order to remain in school:

‘Many of these children continue to make an enormous effort to get the best education available to them – working in exchange for school fees or walking for hours each day to get to and from school. For these children, education represents the possibility of escape from their current circumstances. As one child says: ‘education gives me freedom’ (Giese and Meintjies 2003: 22)

It seems, then, that education does not necessarily lose its value in the eyes of affected people. However, these studies are, generally, focused on other aspects of the pandemic, and mention almost in passing the effects on educational decision-making. One qualitative study focusing particularly on the value of education among HIV-positive mothers in the Cape Town Metropolitan Area, did confirm the importance that these mothers attach to providing education for their children (De Lannoy 2005). Otherwise, there is little or no literature focusing directly on the effects of AIDS on the value of education.

Indications could perhaps be found in the psychological literature that points at the likelihood of various psychological problems among AIDS-affected children and young adults. These include a heightened risk of internalisation of problems, such as depression, being more withdrawn, anxious and stressed (Cluver 2007; Brandt 2005), as well as negativity or apathy (LeClerc-Madlala, 1997). Some research has further indicated that children's hopes and expectations for the future may change after witnessing their parents' or caretakers' death (Stein, 2003), that children may experience feelings of hopelessness, loneliness, anger and confusion in the context of HIV and AIDS (Wild 2001). Orphaned children have also been found to believe that they do not have any close friends (Cluver and Gardner 2006). One study of older children between the ages of 11 and 16

found that 'living with an HIV positive mother resulted in a shift in the children's core assumptions about life, fear of death, and a sense of stigma and isolation' (Reyland, Higgins-D'Alessandro & McMahon 2002, quoted in Brandt 2005: 7-8).

Despite this abundant evidence on the psychological consequences of AIDS, Cluver and Gardner (2006) found no evidence of higher levels of conduct or behavioural problems in their sample of orphaned children, countering the earlier mentioned belief in the development of such behaviours among affected youth.

I will return to some of these findings while describing the results of my analysis of qualitative work with young adults: many of the emotions and psycho-social reactions are recognisable in the narratives of my respondents. However, rather than shifting their focus on short term thinking with regards to education, many of these young people maintain a long term strategy towards success in which education plays an important role.

## **Sampling and Research Setting**

The study sample comprised eight affected young adults between the ages of fourteen and twenty-two growing up in the Cape Flats – an area of low income settlements within the Cape Town Metropolitan Area. The Cape Flats townships score extremely low on human development in terms of household income, unemployment rates, health indicators, access to services, etc. ([www.capegateway.gov.za](http://www.capegateway.gov.za) 2007). At the time of the interviews, my respondents resided in either Khayelitsha, Gugulethu, Nyanga or Philippi, where unemployment rates are at least 50%, and where close to at least 40% of people live in informal dwellings and again close to 40% have no access to piped water within their dwelling or yard. In Khayelitsha, it is estimated that approximately 35% of the people do not have access to a flush or chemical toilet (Census 2001 data; cf. also e.g. Thom, 2006). Among the highest rates of HIV-prevalence are estimated to be in the Cape Flats, with estimates for Khayelitsha at approximately 25% - presumably the highest prevalence rate in the Western Cape (School of Public Health and Family Medicine, 2007).

At the same time, a range of home-based care services and specifically AIDS-related services are available to the inhabitants. Some of the affected young people were contacted with the help of such organisations as Wola Nani in Khayelitsha, Nokuthembeka Home Based Care on the border of Gugulethu and Nyanga, and the Crossroads Health Care Centre. Others were sampled less



purposefully and disclosed being affected during the interview or follow up talks afterwards.

In order to narrow down certain effects of the AIDS pandemic, I adopted a narrow definition of ‘affectedness’, and used the snowball sampling technique to reach young adults who are either infected or living/lived with a primary caregiver who is HIV positive or who died of HIV and AIDS related illness. Of the eight participants in this sub-study, one was HIV-positive herself, two were living with their HIV-positive mothers, and five had lost their mothers to the disease.

## **Limitations Of The Sampling Method**

The sample may be biased by including purposefully sampled young people who have access to support groups such as Wola Nani, as these would automatically be the young adults who have a stronger support network than those affected young people who have not found their way to support groups yet. Real and perceived social support has been found to have a significant impact on young adults’ psychological adaptation process. I may therefore have reached young adults who are dealing with their affectedness in more optimal ways than some who have less support available to them. I attempted to reach other affected young adults by snowballing on from the first respondents, taking special care to emphasise that the study was about decisions around education, rather than around health related issues. However, most of the participants stated that they either could or would not approach their friends, or that those who they did contact would rather not take part in the study. The data collected through this first round of interviews does not allow me to draw any conclusions as to why this might have been the case, but some of the respondents told me they would just not feel comfortable asking the friends whom they know were having a really hard time. A lot may have had to do with AIDS-related stigma and the unwillingness of young adults to give their friends the impression that they had broken their confidentiality, or unwillingness to put themselves in a position where they might risk being stigmatized.

Furthermore, I have not, at this stage of the research, managed to reach any young adults who may have dropped out of school<sup>4</sup> as a result of the AIDS pandemic. This might be a consequence of the snowball sampling technique, or

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<sup>4</sup> By young people who ‘drop out’ of school, I mean those who leave school without having passed their matric exams.

it could be an indication that young people are not necessarily dropping out in large numbers because of HIV and AIDS<sup>5</sup>.

Drop out numbers in South Africa vary depending on the source consulted. On drop out in general, some research states that 'at least 60% of a million plus group that begin primary education drop out of school before completing secondary education' (Moleke 2006). When looking at enrolment rather than dropout figures, the Department of Education (2006) indicates a decrease of close to 20% in comparing enrolment figures of seven to fifteen year olds and those of seventeen to eighteen year olds. Data collected by the Cape Area Panel Study reveals that, of the original 2002 sample of 4746 young adults between the ages of fourteen and twenty-two, just over 25% had dropped out of school. Drop-out increased significantly as of the age of fifteen (7%), rising to more than 23% at the age of eighteen. Of all twenty-two year olds, just over 48% were no longer in school and had not completed matric (author's own calculations).

As mentioned, there are indications that children who are in various ways affected by the pandemic are often less likely to be enrolled in school (Case and Ardington 2004; Richter 2006). However, although all my eight respondents were closely affected by the AIDS pandemic, and some were living in extremely poor circumstances, all but one of them were enrolled in school. The one young woman, Nozuko, who had dropped out of school, did so for reasons unrelated to being affected by AIDS. Although no generalising conclusions can thus be made on the basis of these facts, the finding that almost all respondents in this sample were enrolled in school, is in itself an indication that HIV and AIDS do not automatically or always negatively affect young people and their caregivers' motivation towards education.

Finally, the analysis of the data collected for this paper does not reflect any of the hypothesised 'problematic' reactions to the pandemic: none of my respondents had, for instance, chosen paths of crime. Again, this might be a consequence of the sampling method, or it might indicate that HIV and AIDS are not the main causes behind young people turning to crime. There were some indirect indications that orphaned young people, young adults living without their parents, or with unsupportive parents, might do so. One my respondents did refer to, and perhaps even identified with young people who had taken to violent crime and gangsterism 'because they have no parents':

Lungile: '.. you see... most of the gangsters don't have parents so some other day it makes me wanna be in a gang and sometimes, I just..'

A: Why do you say it makes you want to be like that?

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<sup>5</sup> In later stages of the research, I will try to estimate figures on HIV/AIDS related drop out, by means of quantitative data collected by the Cape Area Study.

Lungile: ‘Like to be hijacking, to smoke tic tic, [...] *Because they’re like... they’re the same as me. They don’t have parents*’.

Again, it is unclear whether this refers to a bias in the sampling of affected young adults specifically: Lungile does not clarify whether these young adults ‘who have no parents’ are orphaned as a consequence of AIDS. It is important to keep in mind that references to gangsterism and crime were also abundantly present in the narratives of non-affected young adults, and that various factors ranging from economic scarcity, the need to belong to a broader group, the search for (self) respect and esteem, etc. were mentioned as possible underlying reasons of this.

It is difficult to estimate what proportion of either affected or non-affected young adults would take to strategies involving crime<sup>6</sup>. There are no exact numbers available on involvement of youth in gang activity in Cape Town, let alone on whether or not such activities would be related to the youth’s potential affectedness by the AIDS pandemic. Researchers working on the topic have estimated the number of gangs in the whole of the Cape Flats area to be around one hundred, and the number of individual active gang members at approximately one hundred thousand (Standing 2003). Other sources mention ‘tens of thousands of gang members in Cape Town’ (Irinnews 2007).

## **Interview Techniques**

The eight young adults were interviewed during approximately one-hour and half-hour in-depth sessions, using the same semi-structured questionnaire that was used previously with non-affected youngsters, yet probing the influence of HIV and AIDS on their lives in more detail.

All interviews were conducted in an informal, conversational way, either in a separate room of one of the NGO’s, or at the young adults’ homes. Special care was taken not to ask questions that could be too sensitive or threatening for the respondent. The young adults had given their consent to be interviewed and had been informed that they could refuse to reply to a question if they felt uncomfortable with it. One of my core respondents was present at most of the interviews to help with translations whenever young adults felt more at ease replying in their mother tongue; however, some respondents expressed the wish to talk to me only, in which case the interview was done in English and by me

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<sup>6</sup> Further research using the Cape Area Panel Data will look into the possibility of estimating this number, on the basis of life and schooling history details provided by the survey respondents.

only. The same topics were discussed in all interviews, whether the translator was present or not.

## **Structure Of The Paper**

This paper will first provide a brief summary of findings on educational decision-making from a sample of non-affected young adults. Then, an overview of the way in which the young adults<sup>7</sup> in the sample constructed a value around education will be given, from there moving onto the extent to which and the way in which this value is acted upon. In the second part, the paper will focus on ‘fragility’ in educational decision-making, treating HIV and AIDS as a factor in this complex of fragility.

## **Short Summary Of Control Group Findings**

Results from the base line analysis (i.e. of data collected of a sample of non-affected young people) indicate that young adults’ educational decision-making is an integral part of how they construct their identity within the complex web of factors shaping their youth in the ‘new South Africa’. As such, I identified different strategies in attempts to construct one’s identity.

In a first strategy, young people choose to focus on their desired future success. They find pride in creating a long term oriented plan to fulfil their dreams, rather than opting for quick routes to material gain and respect. Choosing in favour of education is an intrinsic part of this strategy, as are the decisions to maintain mainly, or in some cases only, supportive friendships. Also included is a search for support in traditional institutions such as their homes and families, the church, or school itself.

In a second strategy, success is often defined in similar terms as it is by young adults from other groups: constructed often around some high position in the corporate world that would provide material wealth and esteem, or, for some, in media or international careers that would provide them with excitement, an ‘escape route’ out of their current, for them ‘boring’ township life. There is, however, no matching plan to reach these ambitions; dreams are not acted upon through long term oriented strategies and therefore merely remain fantasies. Young adults in this group seem to focus on short term solutions against

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<sup>7</sup> Throughout the paper, pseudonyms have been used to refer to the young adults who took part in this study, in order to protect their identity and ensure their confidentiality.

deprivation, and look for quick paths to ‘success’: ‘they want to live the fast life’. Many thereby seem to lose track of the value of education; although not explicitly rejecting a schooling ideology, some might turn to crime and others to drinking and drugs to ‘take away the stress’ of being pulled between poverty and the wish to ‘live a fancy life’.

Often, however, the strategies are blurred, they are certainly never static, and many mixed and ‘in-between’ versions can be noted, one of which may be an almost complete inertia; another may be a combination of gangsterism and schooling, etc. Young people express doubts when choosing one way or another, some tend to move between different strategies, depending on the often shifting weight of different elements that shape the context of their township youth. The presence or absence of supportive social relationships, the pressure of peers and the need to belong, household shocks, functional or dysfunctional schools, etc. can all lead young adults to a point of having or wanting to renegotiate a strategy. This leads me to conclude that not only their world, but also their choices themselves are characterised by ‘fragility’. I use the term in a broader sense than it was originally introduced by Henderson (1999), and refer to it as the compound of ‘fluid’ social relationships, economic pressures and inequalities, crime and violence, and the temptations, influences and frustrations caused by a globalised, materialistically oriented society that offers young people today a myriad of choices, yet in the absence of strong guidance and evidence on the outcomes of such choices.

It is obvious that HIV and AIDS can easily add another layer to the ‘fragility’, with such shocks as parental loss, household dissolution, migration of household members or of young adults themselves, who may have to find and settle into a new home environment, a fostering arrangement, etc. The cumulative psychological effects of all these may ‘influence children’s ability to adapt to new places and develop essential social relationships necessary for integration into community life’ (Van Blerk and Ansell, 2005) and might – as suggested in the previous hypotheses – lead young people to rethink their desired ways of identity formation.

## **Positive Choices Around Education – A Strategy Oriented Towards Future Success**

Similar to non-affected young adults, my findings indicate that the respondents in this study who choose to act positively with regards to their education construct a primarily instrumental value of schooling: although education may

not provide them with an immediate way out of their ‘fragile’ worlds, its importance lies in the future, and in a better and successful life.

‘I think school is important because as you can see nowadays, in order for you to get a good job, you need to get well educated.’ (Lutho)

‘It’s very important to go to school, because when you did not go to school, then it will be hard for you to find a job. Because you don’t have the skill..’ (Nozuko)

A ‘good job’ is mostly perceived of as one that offers some form of stability and that does not involve hard manual work:

‘I think because then you don’t have education and you can work hard, you are carrying a lot of heavy things. And when you go to school, you can have lot of time [...] maybe working like at the office, and let others and tell them what to do...’ (Lutho)

‘She thinks it is good to learn so that you can get a better job. And even if you have done your matric, you mustn’t work in a restaurant... you have to go further and go to university’ (S. in translation for Ziyanda).

Success, for all young adults in the sample, is described often in material terms - to have one’s own house and a car – as well as a sense of independence:

‘I will be living in a fancy house, driving cars, having everything I want’ (Lungile)

‘She hopes she will have her own house, living on her own, and working for herself’ (S. in translation for Nozuko).

Yet for many, success is more than just material gain. These young people see education as both the means and the goal – hence success also includes reaching the levels of education desired:

ADL: ‘When would you feel you are successful?’

Lutho: ‘*When I finished all my courses and my grades* and I have a job and I own a house and a car and I have a business’

There is clearly also the wish for a stable family life, in a safe surrounding: to live ‘in a place where there are a lot of police stations, because I... ja.. crime’ (Lutho).

Often, there is also an element of altruism involved in success, mediated again by what is believed to be achievable through education: it will allow young people to, at one point, take care of others in the community and the family. Zolani, for example, asserts that he wants to reach a level of success that would allow him to help others. It is here that the impact of HIV and AIDS on his views and values transpires, when he says:

Zolani: ‘... I want to be a very well educated person, and a person who can help others. Maybe a scientist, to research a lot.

ADL: What would you like to research?

Zolani: ‘About... medicine, that can help people, like HIV. And lot of things, cancers, ... yes.’

Similarly, Lutho expresses his wish to learn more, so that he can ‘fulfil [his] dreams’: ‘I want to be an electrician’. He explains:

Lutho: ‘because I want to change the world, the way it is [...] I want to change the cars, and railway lines, lights and all the electricity [...]’

ADL: ‘Why do you say you want to change the world?’

Lutho: ‘Because in our communities, there are mostly shacks, people are living in shacks and there is a lot of crime in the shacks. And there are those things like cables... and people can die because of those things’

Ziyanda explains that she would like to be a social worker in order to be able to help people, ‘understand their problems, ja... and ja, I want to help them a lot’; and Thando, when asked what he would like his life to look like in five years time, prioritises his brother’s education over some of his own wishes:

‘I don’t... building this home, having my own car. *After my brother’s study*. Those are the things I want’ (Thando)

Interestingly, yet perhaps not surprisingly given the context of low literacy levels among the elder generation in many of these young adults’ lives, the positive belief that education is the route to such success, is not always constructed on concrete positive examples in the youngsters’ environment<sup>8</sup>. It can be, as in the case of Lutho - ‘like my cousin brother, he is doctor now..’ – yet others will base themselves on positive examples in broader society. Lungile, for example, mentioned ‘the president’; Still others go on what they have heard others say:

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<sup>8</sup> Census 2001 data indicate that less than 20% of all adults in the areas that the respondents live in, have completed grade 12; maximum 40% of all adults have completed grade 7(Census 2001).

‘Just by hearing. She knows that there are people out there who have studied hard and have good jobs, but not in her family. She can’t say there is someone in her family that has education and has a good job.’ (Ziyanda)

However, in a context also of high unemployment levels and extreme deprivation, there are, according to some, also *more immediate and more concretely oriented instrumental facets to education*, in that going to school is the place where one learns basic skills such as reading and writing, *today*:

‘... and there are children who cannot read, like if the teacher says the student must read something on the black board, and that student cannot read. He thinks that it is best for a person to school because at some point the.. the person can read himself and he can write, he thinks school is the best’ (S. translating for Lutho).

Another immediately noticeable facet of schooling is, that it will keep one out of trouble, away from the activities of gangs, and of those who just drink and smoke.

‘... when you are at school, there are many things that are happening here in the environment, maybe bad things, then you are not involved’ [...] ‘because when you are doing that (getting involved in crime), you are putting your life at risk, you can die because of robbery, *but when you are at school, no matter what you cannot die because you have education*’ He clarifies: ‘... you go to school, listen to your teacher and do your work’ (Lutho).

‘School... if you are educated, there are a lot of opportunities for you. *School keeps you out of drugs and crime*, because a lot of my friends are now doing crime. They drop out of school and do crime, they do robberies, house breaking, lot of things. They are even smoking now. I don’t wanna do that’ (Thando)

Apart from the instrumental value of education, young people also describe a possibly more intrinsic meaningfulness of schooling: it teaches one things one did not know before.

- ‘It teaches you things that you don’t know’ (Thando)
- ‘... what is important is you go to school and you learn things that you don’t know and then you know’ (Ziyanda).
- ‘she went there to *learn things she didn’t know*’ (S. in translation for Nozuko, emphasis added)



It is not unthinkable that township youth need to focus also on these more immediate ‘rewards’ of education to maintain their motivation to keep investing in education. In their struggle of trying to reconcile the pulls of a more and more materially oriented society, of a seemingly dominant peer culture of those who wish to live ‘the fast life’, it may be difficult to maintain their focus solely on the longer term oriented belief in a better life after schooling. Nozuko, for example, expressed this more intrinsic and immediately rewarding facet of education even as her prime motivation to try and get back into school after she had been refused to continue her schooling in day education.

## **Practising The Value: Choosing Your Own Way, Even In An Era Of AIDS**

As non-affected young adults who take positive decisions around their education, the respondents in this study refer to very determined and strong ways of putting their positive value of education into practise.

### **a. The Strength Of Dreams**

Young adults in the sample frequently expressed their wish to ‘fulfil their dreams’ – recall for example. Lutho’s quote earlier, and Thando’s remark on how difficult it sometimes is to stay focused:

‘It’s very hard sometimes because there are a lot of things that are happening. The things that other youngsters do; robbing, sometimes you wanna do robbing but you think... *you don’t want to die; you want to reach your goals*’.

The wish to reach their goals and to ‘become someone’, is why they are in school or why they are not choosing the problematic paths of some of the township youth, including involvement in crime, violence, drop-out, drugs etc.

Interestingly, this importance of ‘hope’, dreams and plans in township youth’s lives has been noted also by anthropologists researching ‘safe sexual practises among young men in Khayelitsha’ (Gibson and Nadasen 2006). The aspirations and dreams expressed by the young people in my sample strikingly mirror the words of Gibson and Nadasen’s participants who explained their reasons for practising safe sex:

‘They call me a sissy *but I have plans and I am working on it*. I am not ready to die’ (Joe, 18 – emphasis added)

‘...I have another girlfriend but I am more careful (than in the past) *I have things I still want to do*, it is not easy but I do not intend to let myself be caught’ (Thabo, 22 – emphasis added)

Gibson and Nadasen refer to Zournazi’s (2002) idea that ‘hope must not be restricted to wishful thinking or the desire for a better society sometime in the future. *It should rather be firmly placed in the present and in everyday living*. The idea of an abiding hope directs us to new progressive thoughts that involve *accepting the world as it is while persevering in working towards a more equitable and sustainable future*’ (Zournazi 2002, quoted in Gibson and Nadasen 2006:6 – emphasis added).

Indeed, many of the young people in my sample, who were making positive choices around their education, expressed very powerful strategies and convictions to keep them faithful to their chosen path of enduring their current situation, and of adapting a long term orientation towards a better future. ‘Wanting to become someone’, and maintaining their dreams, is part of the way in which they construct their identity within the daunting world of township life. HIV and AIDS do not necessarily seem to change these processes of identity building – they merely become one extra layer of fragility in the youth’s lives. For some, contrary to many beliefs and hypotheses, they become an extra motivator to remain focused on their future aspirations.

## **b. Negotiating Friendships**

Remaining truthful to their long-term orientation towards success, demands of young people to remain true also to their own values system – the belief expressed by, for example, Thando and Lungile, Lutho and Zolani, that killing people is wrong, no matter how deprived your own situation may be – and also to make choices around their friendships.

Young people make conscious choices to stay away from certain friends, as they might try to ‘corrupt’ them. Thando for example describes how he feels he has lost some of his friends, and how he has decided to keep away from them:

‘I talk to them, but they don’t listen to me. Some of them, I don’t walk with them, walk with them anymore because they gonna corrupt me too’.

These too, are very similar strategies to the ones found by Gibson and Nadasen (2006), and other work such as Kahn's on sexual abstinence (2006).

In choosing to pursue their dreams, and applying these self-controlling methods, the young adults would, however, place themselves, to some extent, almost automatically outside the communities they lived in. They regularly mentioned having to face misjudgement and the scorn of 'the others' who chose not to go to school, or at least not to put too much effort into it:

*And if you're doing something good for yourself and then there will be people judging you, saying that ok, you think you're better than us, and ok.. I personally have to face that, because I'm not the kind of person who hangs around in corners and gossiping and ... some girls doing drugs. And then if you ... you are this person who wakes up in the morning, go to school, do your homework, do your chores at home that you have to do. And then you are like this person who thinks that she is better than the other (Nobuzwe – author's emphasis).*

However, some – even the most convinced believers in their longer term orientation – will negotiate very thin lines between friendships, protection and personal choice: Lutho recounts how one day a young man in his school protected the learners from an attack by a gang he was in fact – outside school time – a member of:

*'I think it was June, the other group of gangsters called Izinyoka [came] to the school, there was a fight and one gangster at the school he protected us and tried to stop them. They started shooting at the office and he stopped'.*

He clarified how the student had stopped the others by saying 'No, I am a learner here at school and I want to protect the school. If you want to kill me, you can kill me, I don't care'.

The story illustrates how one young man juggles his identities of being a gangster outside of school, and of belonging to a group of non-gang related pupils during hours. It is a strong example of the fact that gang-affiliation in the Cape Flats does not necessarily equal an adherence to an anti-school culture, contrary to what may perhaps be expected. Furthermore, it shows that those who are considered gangsters can also be considered friends by their peers. This might especially be the case when they are outside their context of gangsterism, or when their status as a gangster can be beneficial: Lutho says he considers this young man his friend, and clarifies that '... maybe there is someone who wants to do something bad to me ... then I just tell him'; in a short talk after our

interview, Nobuzwe too said she felt it was protective to know some known gangsters, so that when she walked somewhere, she knew other gang members would not hurt her.

Yet when walking these thin lines of friendship, youngsters display a very strong sense of control, being very careful of not getting too involved with peers who might at one point demand them to return a favour:

‘I don’t feel comfortable, because I don’t trust, he would kill, maybe he is doing that because there is something he wants from me’, Lutho says and he clarifies that he would spend only short periods of time with this friend: ‘I will leave on time, I won’t stay the whole evening... maybe about thirty minutes later I go’.

Some, however, negotiate these friendships, not only out of a protective consideration. Lungile, for example, considers those who commit serious crimes, to be his friends. He claims not to take part in their actions, but also takes care not to distance himself from them openly – his quiet acceptance of their acts of violence and their acceptance of his non-involvement offers him the chance to feel he belongs to a group of youngsters he identifies with:

‘I ... most of my friends are hijacking you see ... and I’m still with them, but I don’t do hijacking. I can’t... I can’t just discriminate them or ... I just leave them, I let them do what they do you see, because if I stop them, like I say ‘guys, what you’re doing is wrong’, that ... it’s like I’m a better person to them. It’s like I’m making myself a better person to them. So I just let them’.

Lungile’s positioning in relation to his friends testifies to the ‘pressure on young adults not to stand out’ so as not to evoke feelings of jealousy and envy within the broader community, noted also in earlier work by for example Ramphele (2002). The idea that one tries to ‘act better’ came up also in the sample of non-affected young adults, among those who chose to maintain focused on their schooling (De Lannoy 2007). Differing himself on the basis of their crime-related activities from those whom he otherwise identifies with, would perhaps lead Lungile to pay too high a price of social exclusion.

### **c. The Necessity Of Support**

In negotiating ways in which to reach their individual goals of success, many of the young people actively search for the means to provide themselves with a sense of belonging and of being supported in their choices. For children who

have lost a primary caregiver, or who had to migrate, it might be more difficult to find such support. Most of the respondents, however, describe a 'good relationship' with a relative, a teacher, supportive friends, someone at their church, etc.

Lutho describes how he and his friends support each other by talking about school and homework, and how they spend hours together in the library or church:

'We are doing lots of things together like going to the library and going to the church together. And we just sit and talk together, we don't do those bad things or get involved in crime. We support each other and if one of us is having a problem, we help each other'.

He further describes how he spends a lot of his time going to church, in order to stay out of trouble, away from crime – to remain 'protected':

'I just want to stay in church with other people and learn how to communicate with other people, and as well I ask God to protect me. *He must always protect me, because there are many crimes in Khayelitsha, so I am not involved in those crimes*';

But also to strengthen his inner conviction that he can walk his own path. About the instances when others try to convince him, he says:

'I spend most of my time at *church*, so when they try to talk to me about those things, *I just ignore them*'.

Ziyanda, who lost her mother to AIDS, describes how she found a new support structure among people in her church, her elder cousin, etc. She builds her motivation to keep doing well in school on the fact that she does not want to disappoint those who have shown her their love, support and confidence:

'I don't want to disappoint my family, my sister and my aunt ... and my teacher'

The fact that these young people look for and find support for their choices, relates to an existing body of literature on child and youth resilience in the face of the AIDS pandemic. Studies have shown that ongoing supportive and caring relationships, familiar institutions and other networks function as safety nets for affected children (Battles H. B. and Wiener L. S. 2002). Also, that such support is often imperative for young people to be able to 'sustain their dreams' (Gibson and Nadasen 2006).

## **d. Loss As A Motivator?**

Importantly, for these children who are so directly affected by the consequences of the AIDS pandemic, their motivation to keep investing in their schooling and their future often stems out of the wish to make those who passed away still proud of them.

Thando lists as the most important people his deceased grandfather:

‘I want him to see how much I have grown, how much I’ve learned in life, how much good I’ve done’,

and his deceased mother:

‘I want my mother to see that I’m in grade 12 this year, I’m matriculating this year’.

Equally, Nobuzwe describes how she feels her mother’s death has made her want to perform even more than before:

‘I believe every tear I cried gave me inner strength. Though I wanted to give up, every time I think about her, I want to make her proud of me. In a way her death made me stronger, and it has made me want to help others’.

Narratives in which loss seems to take on a motivating role may also relate to the fact that affected, and especially orphaned children or young adults, feel the need to try and continue their lives as ‘normally’ as possible. Continuing to go to school is one factor or ‘normality’ in the youngsters’ lives (Children’s Institute, 2001; Richter 2006).

## **Stories on ‘the others’: negative educational decision-making as part of a larger construct of identity**

As in the control sample, the participants in this group created narratives around ‘the others’, those who wish to ‘live the fast life’. Contrary to positive decision-makers, these young adults seem to focus mainly on the wish for immediate change, material gain and esteem. They might therefore also lose track of the

value of education – or of any other, non-money making activities for that matter – on their path to instant success. They want to live life *today*:

‘Well, I think, I think it’s the way in which we, we as the youth make decisions for ourselves. *Because there are just people who live for the moment. People who want to enjoy today and they’re not thinking about what’s going to happen tomorrow or whenever.* And then I think, eh, I don’t know ... how come it is this way, but most of the people they don’t see education as ... as ... the best thing to have. And then ... I think if, if you don’t see education as the best thing, then ... (Nobuzwe)

‘They say doing sports is boring; they say school is boring; *you must live a fast life. But in fast life you will get killed.*’ (Thando)

None of the affected participants had openly chosen to lead ‘the fast life’. It is therefore only in their descriptions that the motivations of ‘the others’ are to be found. Many elements do, however, reflect the narrative of one of the non-affected young people, Nezile, who had tried living ‘the fast life’:

## **Making ‘Easy Money’**

Living life ‘the fast way’ seems oriented towards a way of making money now, to allow young people their desired ways of expressing their identity. Of some young adults’ identity formation in the ‘new South Africa’, Soudien (2003) wrote: ‘They are doing so in the shopping malls of the cities, in the shebeens in the townships and the clubs in the suburbs’ (Soudien 2003: 70). Therefore, they need money, to be able to buy the fancy clothes and fit in the ‘trend’ of wearing brands, to buy each other drinks, etc. Striving for fast money seems fed mostly by an individual’s desire to belong to a larger peer culture, rather than the wish to provide also for others in a potentially deprived family or in the broader community. This is in stark contrast with the motivations behind the wish to invest in education, where altruism seems to be a fairly large part in young people’s identity.

In this ‘fast’ strategy, schooling does not necessarily have a place anymore, and the main motivator is not necessarily a total lack of resources:

- ‘They’re making money in an easy way, hijacking people. *So there is no use to go to school anymore for them, because they can make easy money*’ (Lungile)

- ‘There’s this friend of his that even sells cigarettes in school and when he tried to stop him, he said ‘no, I want to do this because I want money ... like *the friend’s father is a taxi driver so the other time the father had a lot of money* and he decided to steal the money.’ (Thami)
- ‘It’s all about money’ [...] ‘they always compete, they always compare themselves, to see which one is poor and which one is the richest. So that some day he can say you don’t have money: you don’t have this, and I have this ... most of the time they do that because they want to show off: because they live in better houses and they have money. Their families are rich so they want to ... I think they want to ... to state the difference that you’re poor and I’m rich.’ (Ziyanda)

## Quick Road To Esteem

Some will, as is clear from the above quotes and analysis of the non-affected sample, also choose crime on their fast trajectory. However, crime then is not only related to wanting a quick way to money; it is also clearly linked to finding or re-establishing some sense of self-esteem, possibly also a form of belonging:

‘In Gugulethu, when you’re a gangster, you’re respected you see; ja, you look like a boss so those ... the things you do, the hijackings, you want to be popular’ (Lungile).

These are very similar remarks to the ones found in the non-affected sample, and seem to refer to young adults’ strategies to negotiate and guide their social integration in a (new) neighbourhood – recount the story of a young woman whose brother eventually got shot in gang related violence, after having moved from the Eastern Cape to the Cape Flats and struggling to find a way to ‘fit in’ (De Lannoy 2007).

## ‘Fragility’ In Educational Decision-making

In her work on young adults growing up in New Crossroads, Henderson defined fragility as ‘linked to fluidity ... It is out of a social context characterised by discontinuity and flux that children’s senses of self emerge as multiple and variable’ (Henderson 1999: 25). In my first paper on educational decision-making, I built onto Henderson’s notion of fragility as being ‘the compound of “fluid” social relationships, economic pressures and inequalities, crime and violence, the temptations and influences of, and frustrations caused by a



globalised, materialistically oriented society that offers young people today a myriad of choices, yet in the absence of strong guidance and evidence on the outcomes of such choices'. In this context, I believe that not only young adults' worlds, but also their choices themselves become fragile.

In the analyses of young adults' narratives around educational decision-making, I identified and described two main strategies of identity-formation within which education may or may not have a place. It is, however, important to keep in mind that these strategies are often not as clear cut as a description such as that above may lead one to suspect. They are always identified at one given time in the respondents' lives and do not, as such, take into account the potential (re)negotiations often necessary under the influence of fragile and shifting contextual factors.

Some of the issues that shape the compound of fragility have been touched on already in the preceding sections; here I mostly want to concentrate on the impact of HIV and AIDS, but also on the consequences of fluidity and instability in social relations and networks, and on the absence of guidance.

## **The Impact Of HIV And AIDS On Young Adults' Lives**

This paper's main concern is with the way in which affected young adults construct a value around education, and the way in which they do or do not act upon that value. Hence, the emphasis during the interviews was not on getting a full life history in light of the AIDS pandemic; the impact of the disease was discussed when the participants brought it up themselves, when discussing broader issues young people in their communities had to face, or by means of a more general, introductory question on the pandemic. Probes were usually 'Does the pandemic have a certain influence on your life?', 'has it changed anything in the way you are living your life', or questions on how the respondents felt about the death of one or both of their parents, etc. Therefore, the results of these interviews are not of the nature presented in specific studies on, for example, orphaned and vulnerable children; there were also no questions trying to identify particular psychological problems among the participants. However, the young adults' narratives do reflect heightened levels of stress, insecurity, stigmatisation, internalising problems and looking for renewed networks of support. Clearly, the pandemic adds an additional layer of fragility to these young people's lives. Hence, I feel it is necessary to provide a brief sketch for each of the young adults on the ways in which they discuss how the disease has had an impact on them, and the strategies they display in trying to cope with

their loss or their status. For the sake of overview, I have treated them in different subsections below; it should, however, be kept in mind that these experiences cannot be seen in an isolated way, but really all interrelate with one another. For each of the respondents, I will also briefly refer to the decisions taken around education.

## **1) Shock, Insecurity And The Search For New Support Networks**

In all of the young people's stories around the impact of HIV and AIDS on their lives, is the (sometimes implicit) reference to a period of shock, distress and insecurity – resonated also in the findings of studies mentioned above, on the psychological impact of living with an HIV-positive parent or of losing a caregiver to the disease.

Nobuzwe is a nineteen year old woman who lives in Nyanga with her aunt and cousins. She lived in the Eastern Cape until she was eleven and then moved to Cape Town to come to school here, and because she wanted to be with her cousins. She disclosed being affected by AIDS in a journal, writing on how she sees the pandemic affecting young people in the community. She wrote about how she had heard from others that her mother, who was still living in the Eastern Cape, was infected by the HI-virus, and how she had wanted her mother to tell her herself. The time in between finding out and leaving for the Eastern Cape was marked by the fear that her mother would soon die. When she could eventually go and visit her mother, Nobuzwe was extremely scared; she wrote about how uprooting the experience of going home only to see her mother die, has been:

*'When I reached the gate of my grandmother's house, I shivered, my knees trembled and my eyes filled with tears. When I opened the door, I had already lost myself in imagination.'* [...] *'I could not accept that it was my mother that was so sick. I battled with suicidal thoughts but I realised that it was not worth it'*. (emphasis added)

When we talked later about how she had dealt with the shock of losing her mother, Nobuzwe told me she had received help and support from the people at SAEP, the NGO she volunteered with, as well as from teachers and her aunt. Nobuzwe's strategy of dealing with the impact of the disease on her emotional well-being was one of actively seeking a support network that could help her work through the emotions her mother's death had caused: she decided to talk to people at SAEP who in turn put her in contact with a counsellor; she further decided to concentrate on school projects, on rewriting matric and on

maintaining close contact with teachers who would motivate her to keep focused on her future. Nobuzwe places a very high value on education, and is now enrolled in her first year of university education.

This conscious search for people who can offer extra support and care is a strategy that is also found in Ziyanda's narrative. Ziyanda shares a little rundown house in Gugulethu with her cousin, Thami - both were orphaned following the AIDS-related death of their mothers, aunt, older cousin, Thami's younger sister and Ziyanda's older brother. The cousins are both fourteen years old. Nokuthembeka informed me about this family: one of the caregivers had informed me that both children had lost their mothers and that the household was really poor. Asked how their mothers' death has changed their lives, only Ziyanda replied. She referred to how the loss of her mother has altered her view on others' living situation: she used to make fun of people whom she considered poorer than herself; now, she considers such statements 'wrong', and will apologise should she make them again.

'I was like joking with people who are poor and then now I see that it was wrong to joke, like... like when I... now if I say something wrong, I can say sorry that I'm saying that'.

She also mentions how she used to stay out late playing with her friends, but now, she just stays at home 'watching TV', wanting to spend time with her older cousin whom she describes as a very important person in her life, offering her love, and material and emotional support. Ziyanda is also very attached to some people in her church who, she says, all love her 'so much'. Staying home and going to church also has the additional function of spending less time with her friends who are 'drinking and smoking'. This resembles self-controlling behaviour similarly described by non-affected young adults, but resonates also the conscious search for ways to (re)establish a network of support after the death of a primary caregiver. Ziyanda is enrolled in school, holds a high value of education, and believes people should study at university level; for herself, she hopes to become a social worker, so that she could 'help them (people) a lot'.

## **2) The Recognition Of Increased Responsibilities**

Both Nobuzwe and Ziyanda seem to have found a more supportive network than Thando, a nineteen year old man from Nyanga who was born and spent his childhood in the Eastern Cape with his grandparents. He moved to Cape Town at the age of twelve 'to get a better education', and came to live with his mother, half brother, aunt and his aunt's children. At the age of thirteen, a year after he moved to Cape Town, Thando lost his mother and both his grandparents. He

describes how stressed and lost he felt after this loss, especially his mother's death – feelings that strongly reflect the earlier mentioned psychological impact of HIV and AIDS on affected and orphaned youth:

‘Sometimes you lose loved ones, you feel left alone; you don't feel good anymore; ... Because I have no mother and all my friends have mothers. ... My mama was always on my side you know, always had good impressions on me’.

Thando's feeling of 'being left alone', of being abandoned, is one noted also in studies on the migration of children, especially after the death of one of the primary caregivers or parents (Van Blerk, Ansell, 2005). Thando's feeling of loss may have been stronger because he had just moved from the Eastern Cape to Cape Town after his grandparents' deaths.

He visibly trembled when he spoke about his mother, and talked about how losing her has made his life so much more uncertain, how it has raised the responsibilities for him to levels that are clearly too high for him to carry alone. Despite living with his aunt, who is recognised as his caregiver by the home based care organisation, the impoverished situation in the house leads Thando to the realisation that he now not only has to look after himself – 'buying yourself clothes and food' – but that he might also have to take on the care of the others in the house. The household lives off the little income that the aunt makes from renting out a back room to a befriended family. Of this Thando said:

‘Sometimes when I look at this home, I think of how many years it will take me to build this home? I think stuff like that, will I finish this home? Will I build this home? Will I be responsible for my brother and my cousin? After that.. myself.’

His questions mirror the findings of other studies, indicating that affected adolescents might suffer from more stressors than younger children as they would more readily be the ones expected to take on extra responsibilities when a caregiver gets sick or passes away (Rotheram-Borus et al. 2005).

The wish to escape his perceived responsibilities, to be independent and to not remain stuck in a situation of structural poverty emerges through Thando's story, when he says: 'Sometimes I wish I had my things, don't bother no one, just do my thing'. The young man doesn't seem to have an immediate extra support network that could take some of the pressures of his shoulders. His aunt asked the home based care organisation to perhaps make contact with counsellors, but at the time of the interview, no contact had been made. Despite the clearly high levels of stress and insecurity, however, Thando maintains a

steady focus on his education: he is matriculating in 2007, and feeling extremely proud about that. His wish is to study further and, through that path, be independent and in a position to take care of others in future.

Education is equally important in the life of Zolani, a shy, fifteen year-old boy whose mother is HIV-positive. He spent eleven years of his childhood in the Eastern Cape, with his mothers' parents, but has been living in Khayelitsha since 2001. He shares a small house now with his mother, younger brother and a baby cousin. At the time of the interview, the household had no other income than the children's child support grant. Zolani knows of his mother's status, and has in the past joined her at support groups; she is not on antiretroviral treatment and has so far not experienced any major AIDS-related illnesses. He does not directly mention any increased stressors or distress caused by the disease, but the impact of being so closely affected do resonate in the way Zolani expresses dreams. He talks about his wish to find a solution to the pandemic and help vulnerable people in his environment: he wants to be a scientist, to research '*medicine, that can help people, like HIV. And lot of things, cancers, ... yes*' (emphasis added). When we talk about his view of his future, he expresses the expectation of rising responsibilities, especially when it comes to taking care of his brother and guarding him against outside pressures; when asked what the difference would be between his life today and his life at the age of twenty, he replies:

*'I think I will have a lot of responsibilities [...] Maybe I have to take care of my brother, in five years time, he'll be learning at this school where I may be. And see a lot of gangs, maybe he will want to do that, and I have to help him go'.*

Lutho is fifteen. He was born in the Eastern Cape and spent a large part of his childhood with his father's family, but when he came on holiday to Cape Town in 2002, he decided to stay and now lives in Khayelitsha with his mother and two younger twin brothers. His mother is HIV-positive and sometimes attends support groups at the Khayelitsha Wola Nani offices. Lutho knows his mother's status and every now and then joins her to go to the support groups. Like Zolani, Lutho does not refer to the impact of the disease in very direct terms. Only when talking about the pandemic in more general terms than his own individual situation, he expresses his wish for HIV and AIDS to just disappear:

*'I feel that if there could be a way of making it disappear I think everyone would be happy'.*

Asked how the disease is affecting his life in particular, he bravely replies '*No, I just live with it, but I am helping people who have HIV/AIDS or whose parents*

have HIV’, and clarifies that he mainly helps them by referring them to organisations and support groups like Wola Nani where they can ‘get advice’. Like many of the other young adults, Lutho attaches great importance to education and to staying out of trouble; he finds support in his family and the support groups, but also in his church, school and library.

### 3) Understanding ‘Those Who Have No Parents’

Here, I zoom into the story of Lungile, Thando’s younger brother of seventeen. Lungile was born in Cape Town, and has lived in Nyanga all his life. He now stays together with his brother, Thando, his aunt and her children, and every now and then has contact with his father who lives in Philippi. About the impact of his mother’s death when he was eleven, he says ‘I was too young... I didn’t... I had no idea about... I was too young’. When I ask him whether his mother’s death influences his life today, he replies he feels sad, and that, living without his parents, he is sometimes tempted to join a gang:

Lungile: ‘...you see... most of the gangsters don’t have parents so some other day it makes me wanna be in a gang and sometimes, I just..’

A: Why do you say it makes you want to be like that?

Lungile: ‘Like to be hijacking, to smoke tic tic, [...] *Because they’re like... they’re the same as me. They don’t have parents*’

Lungile never moved houses or even provinces as the consequence of his mother’s death, yet his story refers to findings by for example Van Blerk and Ansell (2005) who noted that ‘especially migrated children affected by HIV and AIDS – and even more specifically boys, and those children who ended up living a life on the streets – would sometimes get involved in activities such as smoking and drinking alcohol as a way of gaining acceptance and satisfying their need for belonging’ (Van Blerk and Ansell, 2005: 17).

However, even though Lungile identifies with those who ‘don’t have parents’ and refers especially to friends who have joined a gang, he does not join them in their activities, because he ‘see(s) it is wrong. Killing a person is not good’.

Lungile and his brother Thando often express Lungile’s wish to be able to ‘live a fancy’ life. Brand name clothes, a car ... are all elements by which Lungile clearly wishes to express himself, yet financial deprivation makes it impossible for him to do so. Yet, between the pulls of a ‘popular culture’ and the wish to remain ‘on track’ with his education, Lungile actively looks for ways to balance the two. Lungile’s story should be seen together with non-affected young

adults'. From these narratives, not so much orphanhood – remember that Lungile is not a 'double orphan': his biological father is alive, and the two maintain some sort of contact, be it not a (financial) care relationship – yet material deprivation, the wish to belong and a search for esteem, are factors that drive young adults to violence. As for school, Lungile thinks it can sometimes be 'boring', but consciously decided to look for another school that has more facilities and makes time spent on education more pleasurable.

Thami too, like Lungile expresses his understanding of children and young people who turn to crime as a result of scarcity. Not directly linked to the impact of HIV and AIDS on his life, he does mention that he can imagine himself turning to violence at one point, because of 'his life':

'he thinks that he might be tempted to do wrong things. Like he might be tempted to... to rob people while he didn't do that in the past [...]. He says that he is not confident enough to say that he won't do them because when he looks at his life it seems there is a chance that he could do wrong things' (S. in translation for Thami)

It is important to note that Thami does not immediately link these thoughts to his being orphaned or affected by HIV and AIDS. He explains that he might be tempted to use violence when someone, for example, refuses to give him a job. Like in the stories of other young people who resort to violence and crime, Thami's thoughts seem primarily driven by his life of scarcity - his impoverished situation.

## **Shifting, Absent Or Problematic Social Relationships: The Story Of Nozuko**

Nozuko's story is one that reflects the impact of the tumultuous world of township life on her decision-making process. She recounts how she moved from the Eastern Cape to Cape Town in 2000, and how her brother shortly afterwards got involved in gang life. A number of incidents made the community turn against him and her family, eventually threatening to kill the brother and set the family's house on fire. The family left Philippi and lived in Bloemfontein for a few years following this. They returned to live in another part of Philippi in 2004. By that time, at the age of twenty, Nozuko had finished grade 9, and she claims that when she came back, schools in Cape Town refused to enrol her in grade 10 because of her age. Still committed to furthering her education, she decided to start night school, but then fell pregnant in 2005 and dropped out. Today, despite her HIV-positive status, she expresses the wish to go back to school, maintain her high belief in education, and the wish to

‘further’ herself. However, now ‘she thinks she is too old; she has to look after the baby’ and be an extra breadwinner in the household of eight that at the moment is only living off her mother’s nursing salary, and two child support grants.

Nozuko has always constructed her sense of identity around the long-term idea of ‘growing’ herself, of getting and furthering her studies and perhaps eventually becoming a nurse and being able to care for others – education was an intrinsic part of her chosen strategy towards personal fulfilment. The complexity of her youth, however, has made it impossible for her to now maintain her preferred choice of education, and led her to renegotiate the strategy whereby she had attempted to construct her identity. She has now chosen to look for employment, while maintaining an option of personal growth and an ability to care by choosing to become a volunteer at the Nokuthembeka Home Based Care Organisation. Strikingly, her HIV-positive status does not have a role in her narrative around educational decision-making. Similar to the other affected young people, Nozuko, even living in a context of HIV and AIDS, maintains strength within her fragile world, and remains focused on her desired sense of identity.

Other narratives, too, reflect the impact of ‘fluidity’ on young adults’ decisions around schooling. Lutho for example makes reference to children who lost their parents – either or not as a consequence of HIV and AIDS – and who might therefore decide they need to go work to earn some money that will afford them food and clothes.

## **Absence Of Guidance**

The importance of the environment on young people’s choices and actions, is, however, certainly not applicable only to children who have lost their parents. It is also reflected in the respondents’ stories around those who might perhaps want to choose to go to school, but find no support or network that can enable them to do so. Young people frequently refer to parents who do not understand their children, who are drunk and spend the money meant for school fees on alcohol, who make no effort to learn what their children are really interested in, which, eventually leads young adults to ‘find other ways to live... it’s they have no other choice, and their parents don’t take good care of them, ...’ (Lutho).

In her narrative around the differences between those who believe in education and consciously act upon that belief, and those who are no longer in school, or who do not put too many efforts in schooling, Nobuzwe, for example, also stresses the importance of having people around you who support you in your



choice to go to school and work hard. However, the absence of such support is, to her, not strong enough a reason to lose interest in education – emphasising the importance of individuality in these choices around schooling:

‘Well, and I also think that the decisions that we take regarding education, I think they are also influenced by the way we grew up, the way that we were raised. Like there are families that ... that strongly ... believe in education, in getting education ... There are, there are families who ... where there is no person who’s motivating the child to go to school, and then like for me, my grandma always say that ‘I want my children to be in school, to be successful’, she was obsessed about teaching, she would say ‘I want teachers in this house’ and what and what and what (laugh). *But then sometimes really you need the motivation from the family and then if nobody cares, then, ja, you ... you see no reason to go to school.* Although people, they are, there are children who come from families who are not so motivating, but they, *just by looking to themselves and what they want to achieve in life and then they decide ‘ok, I’m gonna hold on to schooling’* and, ja...’ (emphasis added).

Absence of clarity and guidance manifests itself in many ways. Many young adults have no certainty of what will happen to their lives and futures when they choose one or other strategy:

‘because most of people who quit going to school in early stages of schooling, like in, others being in primary, they want some ... as of high school, *and I don’t feel that those children or those young adults have the information of the careers that they want to go in, they don’t have the proof that you can go to this career and are not going to, to get a job.*’ (Nobuzwe)

Some might choose to focus on education. Many might subside under the pressure of peers and the wish to belong, not able to show the same strong self-controlling mechanisms as Nobuzwe and the others who hang on to their dreams.

## **Conclusion: HIV and AIDS as a mediator in educational decision-making?**

Clearly, young people who have lost one or more close relative(s) will find their supporting network diminished and weakened drastically – but many try and succeed in finding new support networks. The young adults in my sample who are affected by the AIDS pandemic describe heightened levels of stress and insecurity, with thoughts passing of potentially ‘giving up’ - to the extent that it might lead them to suicidal thoughts. These are psychological problems that have been identified also through extensive research into affected children’s and adolescents’ well-being (see for example Brandt 2005; Cluver and Gardner 2006; Cluver 2007; Wild 2001; Rotheram-Borus et al. 2005).

HIV and AIDS thus clearly add to the already existing list of issues that render their choices fragile. However, the young adults in my sample showed very striking, strong forms of resilience. None of the respondents reject a positive ideology around education, and all construct a multi-faceted value of schooling. The emphasis is thereby on the instrumental value, in that education is the element that could allow them to create better lives for themselves, and for others. Furthermore, they picked up active ways of looking for, and fitting into a new network of support, or of finding extra support from already existing support structures to cope with their situation. Their views on the future are perhaps unclear and uncertain as a result of the stress of having lost a close relative, or with the knowledge of the fact that one day they will lose a prime caregiver. However, their ambitions for the future remain no less than the ambitions found among non-affected young people, and the strategies to reach that future are not necessarily more short-term oriented due to the impact of HIV and AIDS. Success is defined in equally materialistic terms as found among the control group youngsters. Strikingly, in many of these definitions of success, there is now also the wish to be able to take care of, and help others. Maintaining focus on their education is an essential part of their long-term oriented strategy towards that success.

It should be kept in mind, however, that this paper is based on the narratives of a limited number of affected young adults that cannot be considered representative of the whole population of youth affected by HIV and AIDS. Most of the respondents had access to some sort of support network that may have helped alleviate the consequences of their affectedness. Stories of ‘others’ suggest that different reactions may also exist. However, as in the stories of non-affected young adults, it became clear that young adults’ choices around their identity are dependent on a range of contextual factors, often constituting levels fragility in their lives. The findings of this study are therefore nevertheless important,

because they illustrate the ability of these young people to take up agency and to maintain long-term oriented strategies in their process of identity formation in very similar ways to their non-affected young peers. This indicates that generalising hypotheses built on 'doom thinking' around the negative impact of HIV and AIDS on people's values, attitudes and social behaviour should at least be treated with caution.

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