UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA

Katherine Bain

22257960

Supervisor: Dr Linda Eskell-Blokland

Beneath the wings of Aidos (Goddess of Shame): Women finding the courage to live with HIV and the strength to die of AIDS

Submitted in fulfillment of the requirements for the degree of Doctorate in Philosophy (Psychology) in the Faculty of Humanities, University of Pretoria

© University of Pretoria

A Zen master says:

O Young folk
if you fear death,
die now!
Having died once,
you won't die again

- Hakuin

ABSTRACT

This study describes the subjective psychological experience of African women positively living with and dying of HIV/AIDS, with a focus on the significant cognitive, emotional and social themes involved in their subjective sense of coping. HIV-positive African women have been identified as being at risk psychologically, due to gender inequality in African culture and society and the stigma that surrounds HIV/AIDS. Their traditional role as caregivers also places them at risk, but highlights the importance of understanding their experience in order to assist these women and their children. Drawing on interpretive methods within a qualitative research approach, ten women who are coping with their HIV-positive status were interviewed in order to gain an understanding of their experiences of coping with HIV/AIDS. The analysis of the interview material suggests that coping is a process of disconnection and reconnection that entails the ability to know one's own experience. Coping was found to be a process of mourning in which the individual moves from a time of not coping toward acceptance of their status and the changes this necessitates in their relationships. Resolution of mourning seemed to entail greater integration of these women's sense of themselves and psychological strength was found to originate in coping with adversity. The study draws on three theoretical approaches, namely positive psychology, object relations theory and analytical psychology. Carl Jung's theory of individuation and Joseph Campbell's interpretation of it, The Hero's Journey, was used as a frame for the theoretical discussion. Within this frame, Elizabeth Kubler-Ross' stages of mourning were integrated with Donald Winnicott's description of separation in the move from dependence to independence, Winnicott's ideas around the capacity to be alone, Melanie Klein's description of the move from the paranoid-schizoid to the depressive position and Wilfred Bion's ideas around the desire to know one's own experience. Throughout the discussion a number of concepts from positive psychology were explored, such as: coping styles, social support, participation in life, positive goals, autonomy and resilience. The core of Jung's theory, which is the integration of all aspects of the self, allowed space to explore distress and coping, both of which are entailed in the process of coping.

Key terms: coping, resilience, HIV/AIDS, women, self, identity, individuation, autonomy, mourning, social support, dependence-independence, integration

ACKNOWLEDGEMENTS

In memory of Professor Schoeman whose quiet wisdom gave me the courage to start this project – you are missed.

- Firstly, thank you to the women who participated in this study. Your strength to feel through the pain is an inspiration.

- Thank you to Dr Blokland for taking on the 'orphan' with pages of muddled thoughts and gently guiding them to coherence.

- Thank you to my parents for bringing me up to believe I could do this.

- Thank you to Lisa and my friends for putting up with never seeing me and the seemingly endless whining when you did. Your patience and encouragement are greatly appreciated.

- Thank you to Jacki for helping me claim this work as my own, for keeping me sane enough to finish, but not too sane that I missed the meaning.

- Lastly, thank you to Angus, for your gentle presence when I felt alone in the dark on this journey, for surviving the storms, and for loving me anyway.

DECLARATION

I declare that this research report is my own, unaided work. It is being submitted for the degree of Doctor of Philosophy (Psychology) at the University of Pretoria. It has not been submitted before for any degree or examination at any other university.

_____

Katherine Bain

_____

Date

CONTENTS

ABSTRACT.....ii
ACKNOWLEDGEMENTS.....iii
DECLARATION.....iv
CONTENTS.....v

CHAPTER ONE

INTRODUCTION

1.1. INTRODUCTION.....2
1.2. RESEARCH AIMS AND OBJECTIVES.....6
1.3. USE OF TERMINOLOGY IN THE STUDY.....7
1.4. MOTIVATION FOR THE STUDY.....11
1.5. RESEARCH DESIGN……16
1.6. THEORETICAL FRAMEWORK……..17
1.7. BRIEF DISCUSSION OF THE FOLLOWING CHAPTERS……...18

CHAPTER TWO

LITERATURE STUDY

2.1. INTRODUCTION……..20
2.2. HIV/AIDS AND MENTAL HEALTH IN CONTEXT……..20
2.2.1. The impact of HIV/AIDS on mental health and coping.……20
2.2.2. Gender, socio-economic status and HIV/AIDS.....22
2.2.3. HIV/AIDS and social support.....25
2.2.4. HIV/AIDS and resilience.……27
2.3. HIV/AIDS, IDENTITY, CULTURE AND STIGMA.……30
2.3.1. Theoretical and African conceptions of self.……30

2.3.1.1. A modern versus postmodern self……..30
2.3.1.2. A Western versus African self……...35
2.3.2. Gender and identity……39
2.3.3. Culture, religion, stigma and HIV/AIDS……40
2.4. HIV/AIDS, DEATH AND DYING.....46
2.4.1. Introduction……..46
2.4.2. Theoretical conceptualisations of grief and mourning.....49
2.4.3. 'Pathological' grieving.....52
2.4.4. Stages of grief……..57
2.4.5. The role of hope……...63
2.5. HIV/AIDS, SHAME AND STIGMA…….64
2.5.1. Introduction……..64
2.5.2. Shame as an intra- and interpersonal construct.....65
2.5.3. Shame versus guilt.....67
2.5.4. The impact of early experiences on shame.....68
2.5.5. Defenses against shame……...69
2.5.6. Shame and identity.....71
2.5.7. Shame and depression.....71
2.6. CONCLUSION……..72

CHAPTER THREE

DISCUSSION OF THEORY

3.1. INTRODUCTION.....74
3.2. POSITIVE PSYCHOLOGY.....75
3.2.1. Introduction.....75
3.2.2. The Positive Psychology Movement.....76
3.2.3. The scope of positive psychology.....78
3.2.4. Positive coping.....80

3.2.5. Emotional Intelligence (EQ) and the genetics of happiness....83
3.2.6. Positive illusions versus self-awareness and realistic perceptions....85
3.2.7. The role of control in well-being....86
3.2.8. The role of autonomy in well-being....87
3.2.9. The importance of goals and future-orientation....88
3.2.10. Participation in life and social support....89
3.2.11. The role of comparison in well-being....92
3.2.12. Culture and positive psychology....92
3.2.13. Religion and well-being....94
3.2.14. Positive coping and health....96
3.2.14.1. Salutogenesis, fortigenesis and hardiness....97
3.2.14.2. Psychoneuroimmunology....100
3.2.14.3. Social support and health....101
3.2.14.4. Humour and health....102
3.2.15. Conclusion....103
3.3. OBJECT RELATIONS THEORY....103
3.3.1. Introduction and motivation for using object relations theory....103
3.3.2. Klein's paranoid-schizoid and depressive positions....108
3.3.3. Winnicott's theory of development: from dependence to independence....111
3.3.4. Fear of death....117
3.3.5. The manic defence....118
3.3.6. Loss and mourning....120
3.3.7. Loneliness and the capacity to be alone....122
3.3.8. False self development....126
3.3.9. Bion's concept of thinking as containment....127
3.4. ANALYTICAL PSYCHOLOGY – THE WORK OF CARL JUNG....129
3.4.1. Introduction....129
3.4.2. Motivation for the use of Jung's theory in this study....129
3.4.3. Jung's view of personality development....130
3.4.4. Jungian theory and the African world view....132
3.4.6. Jung's theory on the individuation process and the stages of life....135

3.4.7. Jungian individuation as the Hero's Journey.....146
3.4.8. Jung's view of God and religion.....148
3.4.9. Jung's view of 'rebirth'.....152
3.4.10. Conclusion.....154
3.5. CRITICAL DISCUSSION AND INTEGRATION OF THEORETICAL APPROACHES.....156
3.5.1. Difficulties associated with studying the experience of people from an African culture from a Western perspective……..156
3.5.1.1. Introduction……156
3.5.1.2. Cross-cultural psychology……..156
3.5.1.3. Move toward a more culturally sensitive psychology……158
3.5.1.4. Critical discussion of culturally-embedded psychology……162
3.5.1.5. Conclusion……..165
3.5.2. Traditional theory versus positive psychology……..166
3.5.3. Motivation for combining theoretical approaches……168
3.6. CONCLUSION……173

CHAPTER FOUR

RESEARCH METHODOLOGY

4.1. INTRODUCTION……175
4.2. THE AIMS AND OBJECTIVES OF THE STUDY……176
4.3. RATIONALE FOR THE STUDY……176
4.4. THE THEORY BEHIND QUALITATIVE RESEARCH……178
4.5. MOTIVATION FOR USING A QUALITATIVE RESEARCH APPROACH…...185
4.6. RECRUITING OF PARTICIPANTS……...187
4.6.1. Coronation (Rahima Moosa) Hospital……...187
4.6.2. Selection criteria for participation in the study……..188
4.6.3. Definitions of coping……190

4.7. THE DATA COLLECTION PROCESS……191
4.8. DATA ANALYSIS AND ESTABLISHING STABILITY AND CREDIBILITY……199
4.9. REFLEXIVITY……205
4.9.1. Introduction……205
4.9.2. Reflections on the researcher's background in relation to the current study…….206
4.9.3. Conclusion……212
4.10. ETHICAL CONSIDERATIONS……212
4.11. CONCLUSION……...215

CHAPTER FIVE

THE PARTICIPANTS

5.1. INTRODUCTION…….....217
5.2. BACKGROUND TO THE PARTICIPANTS……..217
5.2.1. C……217
5.2.2. K……221
5.2.3. N……225
5.2.4. P……229
5.2.5. S……232
5.2.6. T……237
5.2.7. R……241
5.2.8. O……249
5.2.9. E……256
5.2.10. M……..267
5.3. PATTERNS EMERGING FROM THE PARTICIPANTS' LIFE STORIES…….275
5.3.1. The belief that strength develops from surviving previous hardship…….275
5.3.2. Precocious responsibility and self-sufficiency……..278
5.3.3. Protective attachments……..280

5.3.4. High levels of insight……282
5.4. CONCLUSION……284

CHAPTER SIX

RESULTS OF THE STUDY

6.1. INTRODUCTION……286
6.2. THEMES AND SUBTHEMES EMERGING FROM THE DATA: COPING ACCORDING TO THE PARTICIPANTS……286
6.2.1. Coping with loss of happiness and the ability to feel happy……287
6.2.2. Coping with loss of physical health and possibility of death……289
6.2.3. Coping with the loss of financial stability……291
6.2.4. Coping with the impact of an HIV positive diagnosis on sense of self, roles and relationships……294
6.2.4.1. Coping is resolving the loss of loved ones……294
6.2.4.2. Coping is the ability to move through fear and shame of stigma and discrimination……299
6.2.4.3. Coping is the ability to talk about their HIV positive status……304
6.2.4.4. Coping is being able to accept support……311
6.2.4.5. Coping is being able to maintain a caretaker role……318
6.2.4.6. Coping is being independent and self-sufficient……333
6.2.4.7. Coping is not feeling sorry for yourself or having anyone else feel sorry for you……335
6.2.5. Coping is finding meaning in their status and being able to invest emotionally in a future……338
6.3. INTEGRATION OF THEMES: COPING AS A PROCESS OF DISCONNECTION AND RECONNECTION……342
6.4. CONCLUSION……355

CHAPTER SEVEN

DISCUSSION OF RESULTS

7.1. INTRODUCTION……357
7.2. THRIVING IS SURVIVING THE HERO'S JOURNEY: HIV/AIDS AS A CATALYST TO FURTHER INDIVIDUATION……359
7.2.1. Introduction: The Hero's Journey……359
7.2.2. Separation: Shock, isolation and denial……362
7.2.3. Initiation: Anger, bargaining and depression……370
7.2.4. Return: Acceptance and hope……392
7.3. CONCLUSION……408

CHAPTER EIGHT

CONCLUSIONS AND RECOMMENDATIONS

8.1. INTRODUCTION……410
8.2. CONCLUSIONS DRAWN FROM THIS STUDY……410
8.3. LIMITATIONS OF THE STUDY……413
8.4. RECOMMENDATIONS……414
8.4.1. Recommendations for the mental health treatment of HIV positive women……414
8.4.2. Recommendations for further research……418
8.5. CONCLUSION……419

REFERENCE LIST……421