

## **Chapter 5: Discussion**

### **5.1 Introduction**

According to UNAIDS (2001, in Gow & Desmond, 2002) the number of HIV/AIDS orphans is expected to rise to over 40 million orphans in Africa by the year 2020. The increase in the number of orphans will result in a severe shortage of qualified people available to effectively meet the needs of these children. Thus, the relevance of training lay counsellors to help alleviate this shortage is clearly established. The current research project aims to evaluate a bereavement training programme for volunteers at a Community Centre to address the shortage of counsellors within the local community. The coherence and adequacy of the programme is addressed by means of the volunteers' response and feedback to sessions after each stage of the programme is completed. This chapter discusses the research findings of the current study in relation to:

1. The volunteers.
2. The training programme.
3. The outcomes of the training programme.
4. The limitations of the current research
5. The implications of the current research.
6. Recommendations for future research.

### **5.2 The volunteers**

The literature highlights that the training of lay counsellors should be an educative process involving the acquisition of knowledge and skills (Ouane, et al, 1990). In the current study, following the training programme, the volunteers are expected to have acquired knowledge and skills in relation to childhood bereavement and how to conduct a bereavement programme for children. The results of the study indicate that the volunteers have acquired specific knowledge, however, it is also evident that the volunteers are unable to transfer and adapt this knowledge to different contexts, situations or cases. Thus, it is

important to understand the reasons for this. Is it due to factors within the sample of volunteers, or is it due to factors within the training programme?

### **5.2.1 Language**

Le Roux (1993 p146) suggests that “language is a crucial means of gaining access to important knowledge and skills, it can promote or impede success (in a training programme).” The training programme was conducted in English and all the interviews, Case Examples and role plays, etc., were in English, which is not the preferred language of any of the volunteers. The sample of volunteers reported that their proficiency in English was at least average or good. However, the results indicate, as reflected in the recorded interviews, that language is still a barrier to effective training in this study for many of the volunteers.

The issue of self reported language proficiency might be problematic. While the volunteers reported that they have at least average or good proficiency in English, this proficiency in English may be the ability to converse fluently in English, and not necessarily the proficiency required to understand academic or psychological concepts. The volunteers therefore may have experienced difficulty with academic or psychological concepts and terminology because these terms and ideas may be more abstract and less easily understood (Le Roux, 1993).

In the South African context, language policy promulgates that people have the right to be educated in one of the official languages. As such, in terms of training, it is reasonable to assume that the trainees have the right to be trained in their preferred language. However, this may not always be possible, as those conducting the training programme may not be able to speak the preferred language of the trainees. This therefore raises the issues of interpretation and translation. Is it necessary for interpreters to be part of the training programme? Or alternatively, is it possible to translate a training programme, such as the one

under investigation, into the preferred language of the participants of the training programme?

The use of interpreters and the translation of training programmes also present some problems. In terms of the use of interpreters, common errors may occur within the interpreting process. Vasquez & Javier (1991, in Swartz, 1993) list the following as the most common mistakes made by interpreters:

1. *Omission*: when the interpreter leaves out part of, or all that the speaker has said, particularly when there is a large amount of content.
2. *Addition*: when the interpreter adds to what the speaker has said.
3. *Condensation*: where the interpreter summarises what has been said according to his/her own interpretation of what has been said.
4. *Substitution*: where the interpreter replaces what has been said with something that has not been said.

With reference to translation, this may be as complicated as the use of interpreters. There appear to be many ways to translate a training programme, however, there is no single correct way for this to be done. Also, the process of translating the training programme may be very time consuming, literally taking a number of years (Swartz, 1993).

Thus, it would seem that training volunteers in their preferred language is not necessarily feasible, which brings us back to the issue of training volunteers in English. If training programmes are to be conducted in English, then specific criteria for the selection of volunteers need to be considered. As is evident from the current study, self-reported proficiency in English is not a sufficient measure of the volunteers' ability to cope with the academic requirements of the training programme. Therefore, formalised measures of language proficiency may have to be considered in the selection of volunteers for training.

### **5.2.2 Age**

The average age of the volunteers is 22 years old. Dryden and Feltham (1994) point out, that this may be regarded by some trainers, as being too young for effective training. It is suggested in the literature that the participants in a training programme should be at least 25 years old as individuals younger than this are not likely to have had sufficient life experience (Dryden & Feltham, 1994). In the present study it is the experience of the youngest volunteer in the group that highlights the issue of age. This volunteer (Volunteer 1) took time to settle into the group and it is believed that he might have felt 'left out' because of his age. However, Volunteer 1 demonstrated an awareness and understanding of the experiences of his peers, the youth of the community and was able to share his ideas with the other volunteers. This suggests that age alone should not be the criteria for the selection of volunteers, but rather, that experience and maturity should also be considered. Dryden and Feltham (1994) suggest that people that have had a certain amount of varied work, life and relationship experience should be considered for training, because as a counsellor, the person needs to show personal maturity and draw upon life experience to respond empathically to their clients.

### **5.2.3 Education level**

The volunteers' involved in the current training programme were all educated to at least Grade 10 level in the Further Education and training phase of Education. The education level of volunteers involved in training programmes is an important consideration in terms of selection for a training programme. Based on education levels, one can assume that the volunteers will have the necessary ability to cope with the intellectual and academic requirements of the specific training course (Dryden & Feltham, 1994). However, this factor needs to be considered in conjunction with the language issue, which may contradict the educational attainment level as an adequate selection criterion for a lay counsellor.

#### **5.2.4 Personal experiences of death**

The current training programme relied on the goodwill of the volunteers to participate in the research. Johnson (2000, in Van Dyk, 2001) suggests that willingness and commitment are the most important requirements to be a successful counsellor. However, in terms of bereavement training programmes it is also important that the volunteers explore their own experiences of death. Lendrum and Syme (1992) suggest that knowledge of one's own loss history and re-experiencing one's own grief are important aspects of developing psychological maturity, particularly in relation to a training programme involving loss counselling.

As highlighted in the results section (Chapter 4) of the present study, one volunteer experienced the death of a close relative during the course of the training programme. This experience afforded this particular volunteer the opportunity to share his own experiences of grief with his fellow volunteers. In response to this, the volunteers in the training programme also shared their own experiences of grief. This was helpful in terms of their training because the volunteers became aware of their own feelings of loss and grief. Also, the volunteers were able to discuss their emotional responses to certain activities and explore their own coping strategies.

The volunteer who experienced the death of his relative was asked if he would prefer to leave the training programme and participate in a training programme at a later date, as it was thought that the training may be too stressful for him and that he needed time to grieve the death of his uncle. The volunteer considered this, however, he decided to complete the training programme and stated in the final interview that the training programme had been beneficial to him in terms of understanding his own grief reactions.

However, in terms of recent experiences of death Lendrum and Syme (1992) suggest that similarly to children entering a bereavement group too early, so too can volunteers enter into a bereavement training programme too early as these training programmes might be stressful for those who are grieving a recent loss. Lendrum and Syme (1992) recommend that those who have experienced a major loss should wait at least two years before they participate in a bereavement training programme. This then, has implications for the selection criteria of volunteers wanting to participate in such training programmes.

### **5.3 The training programme.**

As stated previously, the results of the present study indicate that the volunteers have acquired knowledge and skills, and yet show difficulty in applying this knowledge to other contexts or situations. In the previous section, factors inherent in the volunteers that might attribute to their inability to practically apply their knowledge, have been discussed. The following section, considers the factors within the training programme in relation to this finding.

#### **5.3.1 Varied learning experiences**

In terms of the training programme, the researcher tried to provide varied learning experiences for the volunteers as the literature suggests that varied learning experiences are “not only more pleasant and less tiring, they are also more effective” (Jones and Barnes, 1985, p31). The use of lectures, discussions, videos and case studies in the training programme, aimed to facilitate varied learning experiences. However, by evaluating the results of training programme, there appears to be a shortfall in the volunteers’ ability to transfer knowledge from one context to another. Thus, situations in which the transferability of knowledge are practiced, need to be provided for within a training programme. While this has been considered in the current training programme, perhaps these

opportunities are insufficient. Therefore more opportunities or a greater variety of techniques need to be incorporated into the training programme.

Jones and Barnes (1995 p39-42) propose that the following techniques may be helpful in ensuring the transferability of knowledge:

1. *Experiential learning*: encourages participants to learn and discover for themselves by actually experiencing a situation and drawing conclusions about their own responses.
2. *Role-play*: is a technique that is used to give insight, thus helping participants to experience another person's perceptions.
3. *Case studies*: a case study usually presents a realistic situation or individual profile to be considered and discussed. This encourages active involvement of the participants as they attempt to make decisions based on the information presented.

Thus, while role-plays and case studies have been used in the current training programme, these may need to be extended and rehearsed within a variety of case settings.

### **5.3.2 Time**

Dryden and Feltham (1994) suggest that in terms of the acquisition of skills within a training programme, ample time needs to be given for these skills to be practiced. This then raises the issue of time as a factor in contributing to the effectiveness of a training programme. In terms of the current training programme, was sufficient time allocated to allow the volunteers to practise their skills? The current training programme allowed for eight sessions of two hours each for the acquisition of skills and knowledge in childhood bereavement and the Bereavement Programme for Children. Perhaps this is insufficient, and thus, in future training programmes, the addition of, or extension of sessions, could be considered to allow the volunteers more time to practise their skills. The issue of

time is related to the issue of varied learning experiences. With the extension or addition of sessions within the training programme, the volunteers will also be allowed more opportunities to practise their skills within a variety of contexts or situations.

### **5.3.3 Size of the group**

Linked to the issue of ample time to practise the acquisition of particular skills, is the issue of the size of the training group. Dryden and Feltham (1994) highlight that while lectures can accommodate any number of people, experiential learning opportunities and the practise of skills has to be conducted on a small scale. They further suggest that an appropriate ratio of trainer-to-trainees is one trainer to twelve trainees. While this does not necessarily apply to the current training programme, as the ratio is one trainer to ten trainees, this is an important consideration for future training programmes.

## **5.4 Outcomes of the Study**

One of the specific aims of this study is to explore the outcomes of the study. The major outcomes of the study are:

1. The revision of the Bereavement Programme for Children.
2. The need for supervision.
3. The inclusion of HIV/AIDS awareness in the training programme.

### **5.4.1 The revision of the Bereavement Programme for children**

The Bereavement Programme for Children, as described in Chapter 3 of this research report, was devised by a white Psychologist in consultation with white lay counsellors from a nearby church. Guidelines for the contents of the programme were adapted from international research in the field of childhood bereavement. White lay counsellors from the nearby church facilitated the

programme, with white children from the local community. The facilitation of the Bereavement Programme for children was monitored and supervised by the consulting white Psychologist. Within the current research study, this bereavement programme was then introduced to another community at the Community Centre. In consultation with the volunteers, suggestions are made for the revision of the Bereavement Programme for Black children, to make it more applicable within the local community. The feedback from the volunteers after each session of the Bereavement Programme reflects three major aspects for the modification of the existing programme. These aspects are: cultural considerations, practical issues and activities or exercises.

**a. Cultural considerations**

The volunteers involved in the training programme highlighted some cultural considerations that could be incorporated into the Bereavement Programme for children. The first consideration is talking to children about death, illness and funerals. A few volunteers reflected that within African culture, children are not considered to understand death and are often excluded from conversations surrounding death. Within the African culture, it may be difficult for adults to talk to children about death and funerals etc. The volunteers therefore suggested that as is customary within their culture, the adult may speak to the child while the child is sleeping: It is believed that if you speak to a child while they are sleeping, they will be better able to understand what it is that you are talking to them about.

The other cultural consideration that could be incorporated into the Bereavement Programme for children is the understanding of the significance of ancestors. Although the literature in this field is limited, it has been suggested that some African cultures perceive death as a transition from being human, to being an ancestor (Pato, 1990). Within these cultures the ancestors play a very significant role. It is believed that the ancestors remain linked with the family, and continue to protect the living, to be concerned for them and act as mediators for them. The

ancestors watch over the family to make sure that they follow the traditions of the family, and bless or punish the living according to the circumstances (Sebothoma, 1997). Thus, it would seem relevant to be mindful of culture differences and how these may impact on the child's grieving process. These different interpretations are hugely important and research into cultural responses to children in Bereavement programmes and their efficacy is critically needed. Thus, the incorporation of any of these aspects into future bereavement programmes needs to be approached with caution and only after appropriate investigation and research results are to hand. However, great sensitivity to cultural differences needs to be part of any bereavement programme and this could be addressed during supervision as proposed in section 5.4.2.

#### **b. Practical Issues**

The volunteers identified certain practical issues in terms of the facilitation of the Bereavement Programme for children. These practical issues are rooted in the financial constraints of the Community Centre. The Community Centre offers free counselling services to the people within the community that it serves, and relies on funding from outside donors and profits from the sale of bricks and merchandise, as highlighted in Chapter 3. Thus, there are limited funds available to purchase the necessary equipment that some of the activities within the programme require. For example, session 3 requires musical instruments and session 4 requires play dough. The volunteers however, were resourceful, in that they suggested that they, or members of the local community could make these items.

Also, in the final session of the Bereavement Programme, the children are encouraged to write a letter to their loved ones with the emphasis on saying 'good-bye,' and then these letters are attached to a balloon filled with helium and released into the sky. Again, the volunteers were concerned about the practicality of such an activity, and suggested instead, that the children bury the letters that

they have written to their loved ones in a special 'good-bye' ceremony. Again research is clearly indicated in these areas to explore the significance of these activities for children in grief.

### **c. Activities or exercises**

Finally, the volunteers identified certain activities or exercises within the Bereavement Programme for children that they considered should be modified to make these activities more relevant to the children in the local community.

#### Week 1

In the original programme, not much time was spent on allowing the children to tell their story about their losses. As a modification to the programme more time can be allocated to allow the children to tell their stories. As they share their stories, similarities of experiences can be discussed thereby establishing elements of trust and cohesion as well as validating the child's own experiences and reinforcing the notion that they are not isolated in their grief (Papadatou, 1991).

With this in mind, the volunteers and the researcher felt that it might be useful to change the ice-breaker of the first session. The modified ice-breaker allows the children to tell their own experiences of grief. Each child is to be given a card, on the outside they can draw a picture of themselves and on the inside they can write a short story about themselves, with particular focus on their experiences of grief. The cards will be collected at the end of the session and returned to them in the final session.

#### Week 2

This session addresses children's understanding of death and their 'magical thinking' that they may feel responsible for the death of a loved one. It may be difficult for children to express their feelings of guilt. Perhaps they lack the

vocabulary to describe their feelings or perhaps they think that their feelings are inappropriate or unacceptable. A technique that can be used in such situations is to read a story to the children and ask them to identify the feelings that the character in the story might be feeling. This activity permits the child to disclose feelings in an indirect, non-threatening way and this may in turn lead to a discussion of the various feelings associated with guilt (Papadatou, 1991). This technique is used in this session. In this session, the children are read a story titled "The Boy who believed" and a discussion of the boy's feelings ensues. The volunteers thought that by changing some of the names of the children in the story to that of common black children's names, the children in the bereavement group might more readily identify with the children in the story.

#### Week 5

It is important to prepare the children in the Bereavement Programme for the termination of the group. It is argued in the literature that the members of a bereavement group should be encouraged to reflect upon specific memories of the group meetings, for example how they felt at the first meeting compared to how they feel now, what was their favourite activity or least favourite activity and what it feels like to say good-bye (Papadatou, 1991).

While this has been included in the original programme, the researcher and volunteers felt that perhaps this should be revised. Instead of leaving the discussion of termination for the final session, it could be initiated in week 5 to allow the children in the Bereavement Programme more time to prepare for the termination of the group, and which also gives the volunteers the opportunity to deal with any problems or anxieties that might arise.

#### **5.4.2 The need for supervision**

Within the present study, the volunteers became aware of their own issues, thoughts and feelings related to death. A few also became concerned about what they saw as a lack of 'professional skills' that they deemed necessary to facilitate a bereavement group. To some of the volunteers it was reassuring that they could all have a part to play as a "listening attitude can be as effective as the most piece of therapy" (Pennells, 1995 p81). However, to address the abovementioned concerns, it is recommended to make supervision available to the participants of future training programmes. The consulting white psychologist that already provides supervision for the volunteers in the current training programme, could be asked to provide the supervision for participants in future training programmes. The supervision should focus on the well-being of the children in the bereavement groups, as well as the care and development of the volunteers (Lendrum & Syme, 1992). Supervision will also allow for racial, class and cultural differences to be openly discussed in a safe, working relationship (Maw, 1996 in Swartz, 1998), which could begin to address the cultural differences addressed previously.

#### **5.4.3 Inclusion of HIV/AIDS awareness in the Bereavement Programme**

At the conclusion of the training programme, two volunteers expressed the view that they think that HIV/AIDS awareness should be included within the training programme. This is reasonable because it is clear from the literature that the number of HIV/AIDS orphans continues to grow at an uncontrollable rate (Gow & Desmond, 2002). The shame and stigma that accompanies this disease often complicates the grieving process of children and this can have severe consequences for children in their adult life. Also, AIDS is surrounded by silence and secrecy and Denis (2003) suggests that children may therefore find it difficult to express their emotions, which further complicates the grieving process. Furthermore, he suggests that culture may have a role to play in further

complicating the grief process of children. He refers specifically to the Zulu culture and its customary respect for and avoidance of elders – *ukuhloniphai* (Denis, 2003). Within this culture, children are not encouraged to ask adults probing questions, which he suggests can be a hindrance to children's grieving processes as they are not able to express their emotions openly or ask questions that are important to them (Denis, 2003).

Therefore, the role of the volunteer/ lay counsellor, facilitating the Bereavement Programme for children is firstly to 'break the silence' on the subject of HIV/AIDS by defining HIV/AIDS for the children in simple and direct language, to help them separate the person who died from the way in which they died (Goldman, 1996). Secondly, the volunteers need to try and understand the children's hidden feelings, and help the children to openly express these feelings in a safe environment. Thirdly, the volunteers need to validate the children's perceptions of the illness and death. And finally, the volunteers should encourage the children to ask questions, and be available to answer any questions that the children might have (Denis, 2003).

Thus, it seems necessary to include basic awareness of HIV/AIDS in future training programmes, to equip the volunteers with the necessary skills and knowledge to be able to meet the needs of children within the programme who are affected by HIV/AIDS.

## **5.5 Limitations of the present study**

### **5.5.1 Small sample size**

The size of the sample is small as the current study relied on the goodwill of the volunteers to participate in the study, and only ten volunteers from the Community Centre were willing to participate in the research. The volunteers all come from a specific community context, thus the results of this particular

research study cannot be extrapolated to any other communities or to the wider population. However, the results from this sample provide important indicators for future research projects in both similar and different communities.

#### **5.5.2 Limited time with each volunteer**

The structure of the training programme allowed for two individual guided interviews with each of the volunteers and the duration of each of these interviews was approximately 45 minutes. While the interviews generated extensive data, more individual work with each volunteer could have yielded greater responses for analysis of volunteer competence following the training programme.

#### **5.5.3 Validity of the measures**

The size of the sample and the structure of the present study did not provide for a pilot study to validate the interviews or Case Examples used in the study. However, these measures yielded significant findings that have implications for future research.

#### **5.5.4 The use of 'real' clients**

The current study did not include the use of 'real' clients (children) in the facilitation of the Bereavement programme. The ethical issues of using children in research studies in general and specifically in bereavement programmes may well have contributed to the scant literature available in South Africa on Black children's understanding of death and their grief processes. Thus, the use of children in this training programme, for ethical reasons, could not be considered.

## **5.6 Implications of the current study**

The findings of this study have a number of significant implications that are addressed in the following section.

### **5.6.1 Selection criteria of volunteers**

The volunteers that participated in the current training programme were not selected on the basis of any clear criteria but participated in the study out of a willingness to help those in their community. While this is an important consideration, the results indicate that other criteria also need to be considered. The criteria to consider when choosing participants for a bereavement training programme should include: the age, maturity and life experience of the participants, formally measured language proficiency of the participants, their educational level or ability to cope with the intellectual and academic requirements of the training programme and the participants' own experiences of death.

### **5.6.2 The training programme**

The results of the study also indicate that a bereavement training programme should provide varied learning experience for the participants to facilitate the transferability of skills from one context or situation to another. Ample time to practise the acquired skills should also be provided for, in a training programme. And the number of participants within a training group should be limited to twelve trainees to one trainer.

### **5.6.3 The need for supervision**

One of the outcomes of this study is the recognition of the need for supervision. The inclusion of continuous supervision in future training programmes will

contribute to the development of the participants of the training programme and encourage dialogue on cultural issues.

## **5.7 Recommendations for future research**

### **5.7.1 The Bereavement Programme for children**

The feedback from the volunteers after each session of the Bereavement Programme indicates that the current Bereavement Programme for children must be revised in the ways previously discussed to make it more applicable within the local South African context. The revised Bereavement Programme for children should be investigated within other communities, contexts, and research populations to provide validity and reliability data for its applicability within the local South African context.

### **5.7.2 Children's experiences of death in the South African context**

As highlighted in the Literature Review, cultural differences exist in terms of African perspectives of deaths. However, there is scant literature or research in terms of black children's experiences of grief, particularly in the South African context. This study has highlighted this void and demonstrated some of the major issues and different perceptions of bereavement in children that require urgent investigation. In future research projects, South African children's perceptions of death and their grief reactions need to be explored to add to the very limited information and research findings available in this field of study.

## **5.8 Conclusion**

The aim of the present study is to evaluate a bereavement training programme for volunteers at a Community Centre. Such a study is deemed necessary because of the increase in the number of parental deaths due to HIV/AIDS and

other causes which has resulted in an increase in the number of children experiencing grief. The increase in the number of bereaved children exceeds the capacity of professionals available to help these children deal with their grief.

The current research employs qualitative research methods and an analysis of the data collected indicates that the training programme was effective in that the volunteers demonstrate important perceptual changes in their post-training responses to the interview questions and Case Example. However, these changes appear to be at the surface level, indicating that the volunteers have difficulty in transferring the knowledge from the training programme to new situations. Possible reasons for this might be attributed to factors within the volunteers, such as language or age. However, these results might also be attributed to factors within the training programme, such as limited time to practice acquired skills. The implications of these findings reveal that specific criteria for the selection of volunteers need to be considered in future training programmes, and also that a variety of learning experiences need to be provided for in a bereavement training programme with sufficient time allocated to practise the acquired skills.

Although the current study does have limitations, it also has important outcomes. The revision of the Bereavement Programme for children highlights the importance of considering culture and practical issues in the facilitation of the programme in the local community. The inclusion of continuous supervision would help the volunteers to become aware of their own issues surrounding death and will open dialogue on cultural difference. The inclusion of HIV/AIDS awareness in future bereavement training programmes is clearly necessary to help alleviate complicated grieving in children by addressing the silence and secrecy that is associated with HIV/AIDS deaths.