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Klaits, F.

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MAKING A GOOD DEATH:
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IN AN INDEPENDENT CHURCH IN GABORONE

Frederick Klaits

Seminar of the Institute for Advanced Social Research
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MAKING A GOOD DEATH:
AIDS AND SOCIAL BELONGING
IN AN INDEPENDENT CHURCH IN GABORONE[1]

Frederick Klaits

In September 1997, the Botswana Government sponsored the second annual Month of Prayer intended to involve churches in HIV/AIDS education and prevention efforts. At the opening ceremony for this Month of Prayer, B.K. Sebele, the Permanent Secretary in the Ministry of Labour and Home Affairs, announced that about 148,000 HIV infections had occurred in Botswana between 1992 and 1997, and that 25% of the national population between ages 14 and 49 were currently estimated to be HIV-positive. He went on to remark that churches have an important role to play in setting an example of sexual morality. Sebele argued that by advocating faithfulness in marriage, church leaders might succeed in inducing people to change their sexual behavior. Government and churches have, however, multiple and potentially conflicting agendas in AIDS prevention efforts, as has become apparent, for instance, in tensions over the advocacy of condom use.[2]

In this paper I take a somewhat different perspective on such multiple agendas. Rather than focusing on what religious leaders tell their followers about marriage and sexual morality, or how church participants understand sexual commitment, I concentrate on how members of a particular independent church in Old Naledi, a former squatter community in Gaborone, come to terms with one another's illness and death. Over the past two years, the Utlwang Lefoko (Hear the Word) Apostolic Church has lost three of its members, including the husband of the founding Bishop, as well as numerous close relatives who had not attended their church. In this context, the primary anxiety of many church members is how to transform experiences of illness and death into affirmations of their faith and of their social belonging. This concern is not necessarily the same as those of public health officials and AIDS educators, and it is important to appreciate its legitimacy. In order to illustrate this issue, I present here a case study of an illness and death of a woman member of Hear the Word, who passed away in May 1997 at age 22.[3] I have been involved in this church since 1993, when I began to develop a student-teacher and disciple-minister relationship with the Bishop.

The Hear the Word Apostolic Church was founded by the current Bishop, Mrs. MmaMaipelo K., in 1982, when she heard a voice telling her to stop drinking and smoking, that a great drought was at hand, and that she should found a church in Gaborone. Church members

call themselves Apostles, people who are called to spread the word of God, and the Hear the Word Apostolic Church a "church of the spirit" (*kereke ya semoya*). It is a small and tightly-knit community, with a sizable proportion of members being related by descent or marriage to the Bishop or to her first women converts. In addition, some young adults enter the church upon moving to the city to look for work, having family members or friends from their home areas who had joined previously. Church activities center around the compound in Old Naledi which is occupied by Bishop MmaMaipelo and which also contains the church building, and also around the nearby compound belonging to MmaKefilwe, her first convert and second-in-command. There are over 200 formal church members, but a well-attended Sunday service will comprise about 50 people.

The core of church membership is comprised of mothers and daughters, along with young women in need of patronage or healing. In large part, the appeal of the church lies in enabling women to recast their standing within their households and extended families. For example, MmaMaipelo has often mentioned to me that she was mistreated by her older siblings during her youth, and that during her calling she was abandoned by everyone and publicly called a madwoman (*setsenwa*). "Being a *setsenwa* is different from being ill in any other way," she once told me. "If you have any other illness, your visitors will always tell you that you will get better (*o tla fola*), and they won't name your illness, but if you are a *setsenwa*, people will point at you, shouting, 'Crazy, crazy, crazy! You, you, you!'" For Mma Maipelo, who has only one child, a son, the church has been a way of attaching the daughters of the extended family (*losika*) to herself; with many of its sons she remains on distant if not hostile terms. In a context in which marital and affinal relations can be particularly unreliable, women's social-reproductive strategies tend to focus on exchanging daughters among sisters. Hence much preaching insists on the importance of children listening to or obeying their parents (*bana ba utlwe batsadi ba bone*), in this context meaning primarily that daughters ought to obey their mothers. No man apart from Mma Maipelo's husband has followed his marital partner into becoming a committed church member, and she fights what sometimes appears a losing battle to create marriages between men and women who have joined the church independently of one another.

MmaMaipelo and MmaKefilwe provide young migrants to the city with a place to stay in their compounds, and during her husband's lifetime MmaMaipelo used much of the money he gave her from his work at a slaughterhouse to help out church members in emergencies.

However, the church provides no institutionalized support for the very poor. Members have to pay for their own uniforms and transport to functions which take place away from Gaborone. Since many members earn no cash and depend on wage earners who do not attend the church, they have to balance commitments to their households and extended families against those to the church, lest the support of one or the other be withdrawn. With this thumbnail sketch, I turn to the difficulties presented by AIDS.

Naming Affliction: Knowledge and Loyalty

Widespread illness and death are creating two linked crises among Hear the Word members, forcing them simultaneously to bear heavy burdens of caretaking and to find ways to affirm the value of their faith at a time when bodily healing is more and more elusive. Anthropological treatments of issues regarding how forms of social belonging are shaped by knowledge of affliction, and vice versa, follow from the point made by Evans-Pritchard in *Witchcraft, Oracles, and Magic among the Azande* (1937) that the nature and causes of suffering are not self-evident, and that defining them (or, one might add, refusing to define them) involves moral choice. In exploring the nature of such moral choices and their intersection with public health models of legitimate knowledge, I take my cue from Byron Good's argument (1994: ch.1), borrowed in turn from historian of religion Wilfred Cantwell Smith, regarding the changing significance of the concept of "belief" in religious, medical, and social scientific language. A medical anthropologist, Good points out that there is a juxtaposition common in much social scientific writing between "knowledge" as correct understanding and "belief" as reasonable but ultimately erroneous opinion, an opposition which has motivated debates, such as those to which Evans-Pritchard contributed, about the rationality of "native belief systems." Oppositions between erroneous "belief" and correct, apparently value-free "knowledge" came about, Good maintains, in part as a result of a conceptual and semantic shift in religious usage. Whereas until the eighteenth century the sentence "I believe in God" meant "I love God," expressing loyalty to a divine being whose existence was recognized by all as a matter of course, a common twentieth-century connotation of "I believe in God" suggests that the divinity is a doubtful proposition whose existence the believer nonetheless affirms. Loyalty and faith have only a secondary place in the latter formulation. The parallel in anthropology is that when "belief" is presented as a somewhat inferior version of the "knowledge" of the analyst, the

writer's own social loyalties and conceptualization of a problem sometimes appear in the guise of value-neutral propositions, biomedical or otherwise.

A dictionary definition (Snyman et al., eds. 1990:19) of the Setswana verb *go dumela* is "to believe" or "to agree." However, the semantic range of *go dumela* centers more emphatically around issues of social loyalty than these English equivalents are apt to suggest. Only in a secondary sense, if at all, does *go dumela* connote acknowledgment of the objective existence of a thing. For instance, I once asked a 16-year-old woman, who had joined Hear the Word after having been healed of an attack of witchcraft suffered at school, whether she believed in, or agreed with, witchcraft (*"A o dumela mo boloing?"*). She answered, "Even if someone were to bewitch me, I would not have anything to do with that person, because I do not believe in/agree with witchcraft" (*Lefa ha motho a ka ntoa, nka bo ke se na sepe mo go ene, ka gore ga ke dumele mo boloing*), acknowledging the existence of witchcraft but caring less about its existence than about her relations with those who might bewitch her.

Illness and healing are areas in which issues of social loyalty -- in a word, faith (*tumelo*, the noun form of *go dumela*) -- are particularly central for members of "churches of the spirit." Church members have often asserted to me that you cannot be healed unless you have faith in the power of prayer or medicine, including hospital medicine. In such churches, healing is often conceptualized in terms of the power of God opposing that of witches; prophets often work in conjunction with traditional healers (*dingaka tsa setswana*) to divine the cause of an affliction and to exorcise evil spirits or other influences. However, Hear the Word is somewhat unusual in this regard, since the leaders of this church regard approaching *dingaka tsa setswana* as demonstrating faith in witchcraft rather than in Jesus. The prohibition extends to identifying any illness in such a way as is commonly done by *dingaka tsa setswana*, since church leaders regard traditional healers as fomenting jealousy among relatives and neighbors through their diagnoses. By extension, they tend to be suspicious of a broad set of ritual practices commonly referred to as "Setswana tradition" (*ngwao ya setswana*), practices often administered by traditional healers and connected especially with illness and life-crisis events, including mourning. Significantly, Bishop MmaMaipelo's own father had been a *ngaka ya setswana* himself, and her renunciation of traditional healing after her calling in 1982 was the clearest, and perhaps to many the most upsetting, sign of her attempt to recast relations with her extended family.

I once related to MmaMaipelo, together with another woman elder of Hear the Word, an accusation made to me by a widow claiming that her recently deceased husband had been bewitched by his own mother, who had been jealous that her son was taking better care of his wife than of herself. The elder explained to me that "in Setswana tradition" (*ka setswana*), a parent who feels neglected by a child can afflict that child with an illness known as *dikgaba* (sorrows), which has to be treated by traditional doctors. MmaMaipelo interposed with the assertion that the widow had been tricked by *dingaka tsa setswana* into attributing her husband's illness and death to *dikgaba*. Traditional healers, she asserted, investigate who is at odds with whom, and during divination sessions attribute illness to the jealousies which they know to exist. I asked her whether she would believe a person who told her that he or she was sick from *dikgaba*, and she replied, "I do not believe in/agree with *dikgaba* (*Ga ke dumele mo dikgabeng*). People have a duty to speak to one another about their problems. *Dikgaba* is a sign of jealousy, of a failure to talk things out." Again, the focus is not on the ontology of suffering, since whether or not *dikgaba* objectively exists is not the issue for MmaMaipelo. The point is that *dikgaba* is not what she wants to build her church community out of. Whether or not this is the case with AIDS is a matter of ambivalence.

I begin by describing one of the weekly meetings of the Youth of the Hear the Word Apostolic Church that I attended in July 1997. The Youth (*Basha*) of the church consist of about twenty women and five men, ranging in age from about 17 to 30. The Youth leader announced that we would be performing two dramas. In the first, some of the Youth would take on the roles of evangelists trying to convert the others, who pretended to be non-believers. The second skit would be performed at an upcoming inter-church meeting organized by Mennonite Ministries at Naledi Community Hall to address the subject of AIDS. Both dramas appeared to have been organized spontaneously. In the first skit, some of the Youth pretended to be beer drinkers, some followers of traditional doctors (*dingaka tsa setswana*), and some stubborn people who refused to believe in God or the Bible. The Apostles approached each of these groups, beginning by saying, "The land has been laid waste -- you see that children do not listen to their parents, and that the disease AIDS is out there. So you have to believe and repent in order to gain eternal life. The flesh will die, but the spirit will live on." The "non-believers" asked them dismissively, "Where is God? Have you ever seen Him? God is in this beer bottle, or God is in these divining bones, or God is my grandfather." To which the Apostles responded that God is not seen, that God is the

word or the voice that lives in the flesh of a person. This is perhaps the central teaching of the Hear the Word Apostolic Church, one which expresses a presumption that words summarize persons and communicate their power over others.[4] Faith and social loyalty are thus often understood in terms of verbal transactions.

The subsequent skit about AIDS opened with a young woman who refuses to listen to her parents. Rather than doing her housework, she runs off to a disco, where her girlfriends set her up with a predatory man. Afterwards, she gets sick, grasping her stomach and doubling over, and comes back to her parents, begging them to take care of her. Her father throws her out, saying, "You're sick because you refused to obey," but her mother feels sorry for her and takes her to the doctor, who immediately announces to both mother and daughter, "It's AIDS." At this point the mother runs back to her husband in a panic: "You know what the doctor said?" The father, however, refuses to believe the diagnosis, accusing the mother of just telling stories. The drama then being over, the Youth began a dance, with one Youth member after another standing up in front of the rest, saying that AIDS is out there, that we ought to be faithful to one partner, and that we ought to use condoms. During the dance, the man who played the seducer stood in front of the group and cried out desperately, looking at the veins in his arm, "I have AIDS! I'm going to die!"

Sitting as audience, I was troubled by the implication that AIDS can only be acquired through immoral behavior, so after thanking the Youth for their efforts to help people, I asked them whether they thought it possible for a person who leads a Christian life to have AIDS. Bishop MmaMaipelo, who had been in attendance, took it on herself to answer my question. She said that Christians might contract AIDS, but in fewer numbers than non-believers, and in any case if you are a believer you will have eternal life. I could not help thinking, however, that from a public health standpoint, the value of being a Christian is considerably diminished by such reasoning, since health officials tend not to be concerned about life in the next world. Perhaps a similar thought occurred to MmaMaipelo, since she concluded by saying that she did not much like to preach on the topic of AIDS and was doing so only because the government would like church leaders to make statements on the subject. "It's the law" (*Ke molao*), she said. In other words, she has her doubts as to whether talking about AIDS is good for evangelizing. She later told me, in fact, that my words had convinced her that the Youth should not perform the drama.

Indeed, a drama in which people who are acknowledged to have behaved immorally contract a fatal illness as the result of their actions does not reflect the real poignancy of church members' situations. They were able, I think, to perform the skit spontaneously because they had seen similar dramas before, and light-heartedly because it did not portray their deepest concerns. The dilemma which is most pressing to those who attend Hear the Word involves how to affirm the value of being a churchgoer in the face of widespread illness and death. Preventing the spread of disease, in comparison, is a secondary issue. The intentions of church participants in caring for and subsequently commemorating the young woman who died in May 1997, Ms. Tebogo K., were not to make use of her illness as an occasion to warn others against AIDS, but to diminish the violence of her death by asserting her worth as a faithful member of the Hear the Word Apostolic Church.

What church participants stressed in their care for Tebogo was not the nature and cause of her illness -- in fact, they went to great lengths to cultivate ambiguity about precisely this issue -- but that she had attained eternal life by refusing to give up her faith. Although I have often heard church members discuss issues of marriage and sexuality, in the context of their concern for Tebogo they never raised such questions, at least in my presence. Instead, they concentrated on making her illness and death a means of connecting her to the church forever. As Arnold van Gennep argues in *The Rites of Passage*, funerals have the effect of uniting the deceased with the world of the dead, in this case making Tebogo a fully successful member of Hear the Word by connecting her with those who have lived and died well. As in all rites of passage, however, certain social ties are broken even as others are created. One of van Gennep's most important points is that incorporation does not exist except in the context of separation, and vice versa. Thus, there is an ironic parallel to be found between the parent-child relations enacted in the AIDS skit and the experiences of Tebogo's family and caretakers. Many of those living in Tebogo's home village in the Central District appear to have had ambivalent feelings at best about having her die under the auspices of a church in Gaborone, and to have resented the efforts of church members at the funeral to identify her for all eternity as a child of Hear the Word.

Negotiating Care and Faith

Tebogo, who was born in 1975, joined Hear the Word in 1993, soon after she moved from her home village to Gaborone to look for work. She had no children and no recognized

marital partner. At the time she came to Gaborone, her older brother had recently moved to the city and joined the church himself; he is now one of its ministers (*baruti*). Soon after Tebogo became a member, both she and her brother moved into the compound in Old Naledi belonging to MmaKefilwe, MmaMaipelo's second-in-command. Starting around 1992, Tebogo had begun to suffer intermittently from a number of ailments. Her outpatient medical card, which her mother showed me after her death, documented a series of illnesses, mainly involving diarrhea, weight loss, inflamed lymph nodes, and genital sores.

When I met Tebogo in February 1997, she had been too ill to work for the previous three months. She was still staying in the compound belonging to MmaKefilwe. Those who were looking after Tebogo included her mother, who had come to Gaborone three months previously from her home village to care for her, three brothers, and a maternal aunt who had a plot of her own in Old Naledi. MmaKefilwe's family, all members of Hear the Word themselves, were as actively involved in caring for Tebogo as her own relatives. They bought food, cooked for her, washed her clothes, helped her to wash, spent time talking, plastered the walls of her room so that she would be warm at night, and helped her go to hospital when she was unable to sleep or needed rehydration. In addition, MmaKefilwe did not ask to have rent paid for Tebogo's room while she was sick. This was an extremely important circumstance given that Tebogo's older brother, working for the City Council for a monthly salary of about P300 (R370), was the only member of her family earning cash, and that her mother was unable to help in the family's fields while staying in Gaborone.

Other members of Hear the Word were also involved in caring for Tebogo, but to a less active extent. The husband of Bishop MmaMaipelo had recently been staying in a tuberculosis clinic, and most church members had given money and food and gone routinely to visit him in hospital. The same outpouring of support did not take place for Tebogo, even though she was often short of paraffin, blankets, and food other than sorghum porridge. Other church members did pay Tebogo visits when she was in hospital, but those who were not staying in the same compound made fewer material contributions. MmaMaipelo, however, visited the compound every day to pray with Tebogo, and her preoccupation with her illness was reflected in her preaching and in her efforts to make me understand what the Bible teaches about death, consolation, and resurrection.

For instance, at a church service which Tebogo was well enough to attend in mid-March, soon after the funeral of the father of one of the ministers, the passage on which the congregation preached was one that I was told concerned *kgomotso*, or consolation. This was 2 Samuel 12:15-23, in which David's child by Bathsheba becomes ill, and David pleads with God to save the child, refusing food, and lying all night on the ground. When the child dies, the servants are afraid to tell him, but when David finds out, he rises, washes, changes his clothes, and eats, saying, "While the child was still alive, I fasted and wept; for I said, 'Who knows? The Lord may be gracious to me, and the child may live.' But now he is dead; why should I fast? Can I bring him back again? I shall go to him, but he will not return to me."[5] The passage that precedes this, in which the prophet Nathan tells David that the Lord would punish him for his sin by causing his child to die, was not read or mentioned in any of the preaching. During this particular service, everyone prayed for Tebogo's health -- although on previous occasions when she had not been in attendance, she had not always been prayed for. Many of those who preached emphasized that death is the road that we must all take, and that we ought therefore to pray to God for healing but resign ourselves to His will if He decides that the person will die. I have heard Hear the Word members preach on this passage repeatedly at funerals and at the *merapelo* services which precede them.

In keeping with their refusal to consider the death of David's child in terms of punishment for wrongdoing, church members made efforts to be as ambiguous as possible about the nature and cause of Tebogo's illness. One effect of this was to leave the potentially explosive question of the justifiability of Tebogo's suffering unbroached; another was to enable them to insist until the very end that they were not going to give up on her. In general, when a person inquires about another's illness, asking "What is the problem?" (*Molato ke eng?*), the answer usually refers to a part of the body that is in pain, rather than a disease name. Perhaps this is the case because disease names are likely to suggest causes, and the less definitive and categorical people are about the nature and causes of affliction, the less danger there is of provoking a decisive confrontation over who is responsible for suffering.

I once commented to MmaMaipelo that she did not seem to be interested in talking about the causes of illnesses, and she replied that this was in fact the case. In Deuteronomy, she told me, she has read that God can cause sickness, but she has also read in Job that Satan can, and she herself is not capable of distinguishing between the two in any given instance. When a person in

the church becomes sick or suffers some other misfortune, she said, she asks herself whether she as their parent has done anything wrong to incur God's punishment, but it is impossible to examine (*go lekola*) another person's spirit to find out what he or she has at heart. Although medical doctors are able to and in fact should investigate (*go tlhatlhoba*) the cause of a person's illness, she herself does not want to do so. For instance, her own husband had been ill with tuberculosis since 1990, but she would not ask him where or how he contracted it, for fear that this would cause trouble in their relationship. "There is no way that we can be separated" (*Ga re ka ke ra kgaogana*), she concluded.

Since the cause of an illness is often rendered ambiguous, its nature is as well. This was certainly the case with Tebogo's sickness. At one point during her decline, MmaMaipelo announced at a women's prayer meeting that it is impossible to tell whether a person has AIDS from looking at them, and that therefore no one should be neglected on the suspicion that they do. When I asked Tebogo's caretakers what the doctors at the clinic said about her illness, they replied that they had told them that she had "sores in her heart" (*dintho mo pedung*), a condition that they could do very little to cure, or alternatively that they had told them nothing at all. Similarly, when other church members asked Tebogo's mother and MmaKefilwe what the problem with Tebogo was, they replied that the doctors had ruled out TB but could distinguish nothing further. After her death, church participants have referred to her illness as "sores in the intestines" (*dintho mo maleng*), without specifying any further cause, and have begun to identify the illnesses of other people in the same way.

In April 1997, I accompanied a number of the women Youth members to visit, give food, and pray for Tebogo at Princess Marina Hospital, the large referring hospital in Gaborone, where she had been taken by clinic workers for rehydration. Tebogo's body was becoming emaciated, she was in terrible spirits, and the Youth stood by her bedside with tears in their eyes. Tebogo then told us that a nurse had asked her whether she wanted to have an HIV test, and that she had said yes, because she wanted finally to know. At this point, one of the Youth shook her head, saying that she disapproved of such tests because if they turned out to be positive, you would despair and be unable to think of anything else. In keeping with this sentiment, MmaMaipelo insisted repeatedly during Tebogo's final weeks that she would not "give up" (*go itlhoboga*) on her, even as there was reason to believe that the doctors had told Tebogo that her disease was incurable. MmaMaipelo went to pray for her every day at MmaKefilwe's compound. We all

bowed our heads as she placed her hands on Tebogo's shoulders, saying that it is not we but God who has the power to heal, and praying for God's glory to enter into her and heal her. While talking to Tebogo afterwards, MmaMaipelo once remarked that people who become very thin (*go bopama*) don't necessarily die, and that she herself might pass away at that moment even though she was not emaciated.

It is important to point out that it is not only church practice but medical practice that fosters ambiguity and secrecy about the nature of illness. When MmaMaipelo told me that she is unwilling or unable to investigate the causes of sickness, she remarked that she does not force anyone in her congregation to show her their medical cards, since they are their secrets. When other people deny to me that they have any knowledge of the cause of a given person's illness or death, they too often remark that they have not seen the relevant medical cards. Medical cards, which are written by clinicians for the use of other doctors, are thus treated as fundamental secrets about people's conditions, secrets which are largely unknowable to the sick themselves, since the cards are written in English and in medical language. An AIDS diagnosis is made a particular secret on these cards. A clinic worker told me that when a person tests positive for HIV, doctors usually do not write "HIV+" or "AIDS" on the card, for fear that this information would then become public. Instead, the word "immunosuppressed" is written, or the code "RVD+" (retroviral disease-positive). In Tebogo's case, a doctor had at one point written on her medical card that "immunosuppression test results seem positive," and during her final weeks, when clinicians were giving her antibiotics, they wrote "immunosuppressed?" on her form, indicating that they too were not quite certain about the nature of her illness.

For their part, those who looked after Tebogo in Old Naledi were, in general, not pleased with the care she was receiving in the hospital, but their dissatisfaction did not stem from the mysteriousness of clinic proceedings. Church members were not angry that Tebogo had not been given a clear diagnosis, been told the reason why she was being given particular medications, or been informed why, as her mother once put it, "blood was always being taken out of her and water put in." Rather, they were upset because the nurses scolded Tebogo, did not give her nutritious food, refused to wash her, and once discharged her without informing her caretakers, so that she had to come home in an expensive special taxi. For this reason, church members saw the numerous hospital visits they made with gifts of fruit and meat as extremely important to Tebogo's well-being.

If everything thus seemed to conspire to make the nature of Tebogo's sickness ambiguous, church leaders did speak to me at length about the illness of another young woman, named Onalenna. Onalenna was not ill in biomedical terms, but often during church services and when she sang with the other Youth she was suddenly entered by the spirit (*go tsenwa ke mowa*) and ran off. When I first witnessed this, MmaMaipelo and MmaKefilwe told me that they did not know what was bothering Onalenna, and that they would discuss it with her. However, about two months later, Onalenna stopped attending church, and then the leaders informed me that her running out of church had shown that she was afflicted with a spiritual disease (*bolwetse jwa semoya*), which they explained to me as follows. "If you are not living well at home, or if people have been bothering you, when you start to sing in church sorrow overcomes you, you are not able to be calm (*pelo yagago ga e wele*), and you may be entered by an evil spirit. You should not think about the life you are leading outside the life of the word of God, and you should not think about the insults you have received from others. People preach properly when they have patience and love for one another." Onalenna, they told me at this point, had quarreled with her marital partner, and her mother had taken her back into her own yard. Onalenna herself, however, told me that she had not been ill at all. When she is entered by the spirit in such a way, she is able to discern (*go tlhatlhoba*) the causes of problems in other people's lives. She blamed MmaMaipelo for "not wanting my spirit." MmaMaipelo, on the other hand, told me that she actually preferred an illness like Tebogo's to one like Onalenna's, since Onalenna's illness demonstrated that she was lacking in faith.

The reason why the leaders of the church discussed so explicitly the nature of Onalenna's illness, so called by them, was that they cast it as a sign of her disloyalty. Once an open breach had occurred between themselves and Onalenna, they had no reason to be ambiguous about the nature of what they saw as her illness. Their calling Tebogo's sickness "AIDS," on the other hand, would in no way have served as an affirmation of her faith, and it might have had the disruptive effect of stigmatizing her and discouraging people from caring for her. However, Tebogo's illness did make it important for all church members to insist upon her loyalty to Jesus and to Hear the Word, since only if they did so could her death make her a fully successful Christian. The one occasion I witnessed before Tebogo's death on which MmaMaipelo did preach about AIDS (albeit in somewhat veiled terms), was an instance in which this question of faith took precedence over concerns about sexuality. MmaMaipelo preached that she was

worried because the land was being laid waste by deaths, and she exhorted the congregation to behave well (*le itshware sentle*) and to repent (*go ikotlhaya*). However, the meaning of repentance was somewhat ambiguous. MmaMaipelo insists that those in her church refrain from having more than one sexual partner at a time, and her preaching might have been taken as a statement of this conviction. Yet what she stressed was that it is important to die believing in Jesus, because otherwise "you will really be dead" (*o tla bo o sule tota*).

One effect of Tebogo's claiming loyalty to Hear the Word was to strengthen ties between her immediate family and the church network in Gaborone. During and after her illness, Tebogo's mother became involved in the church, two of her brothers moved onto MmaKefilwe's plot and became church members, and during school vacation her mother sent another of her daughters from their home village to attend church services. On the other hand, Tebogo's death appears to have created or exacerbated tensions between the Gaborone-based church network and her immediate family, on the one hand, and members of her extended family and residents of her home village, on the other. For instance, Tebogo herself told me that she had relatives (*batho ba losika*) in Naledi who did not visit her during her illness, unlike MmaMaipelo, to whom, like many other members of the church, she referred as her "spiritual mother." During the last week of March, she entered MmaMaipelo's compound screaming that she had heard a voice telling her to pray there, and she was not settled until MmaMaipelo gave her some water to drink that she had blessed. MmaMaipelo likened this episode to her own calling in 1982, implying that Tebogo's running into her compound was a sign that she had been similarly blessed by God.

The relationship between compound dwellers, who were intensively involved in Tebogo's care, and other church members, who appeared more distant, was thus recapitulated in the relationship between Tebogo's relatively tight and extended families. Yet the fact that Tebogo was being cared for in a church compound in itself placed restraints on the ways in which members of her extended family could be involved in her treatment. I formed the impression that if Tebogo's mother had decided that she ought to be moved, she would have been, since church leaders are keen to avoid direct confrontations with families of members. However, once therapy is being managed in a church compound, the relevant family in this regard becomes the tight one.

Finally, a few days before Tebogo died in the hospital in late May 1997, she called MmaMaipelo to come to her bedside so that she could say farewell and leave instructions (*go*

laela). Also present were Tebogo's mother, MmaKefilwe, and the wife of Tebogo's older brother who is a minister in the church. MmaMaipelo later told the congregation that Tebogo had informed them that she had heard a voice calling her name, and that she had seen MmaMaipelo in a dream praying for her. At this last conference, Tebogo also sang her personal hymn, "Se mphete wena yo o rategang" (Do not bypass me, beloved one), which she had always sung during church services in order to obtain the strength to preach. Being able to say farewell and to sing during one's last moments, MmaMaipelo later told me, is a sign that a person has self-understanding (*itlhaloganyo*). The song remains with us as the word lives in the flesh; when a person is absent or has passed away, his or her song is a memorial (*segopotso*).

Confrontations over the Emotional Significance of Death

Tebogo's funeral was the prime occasion for church participants to assert publicly that she was now a fully successful member of Hear the Word. The funeral began, as is customary, with church members accompanying the body from the mortuary to the compound where Tebogo had stayed, in a sense letting it be known that she was associated with that place. When she was laid in the room she had occupied, all the church members extinguished the candles they had been carrying. After about half an hour, she was taken from her room back into the hearse for the drive to her home village, where she was placed in a room in her parents' compound in which her mother and aunt, who had been taking care of her in Gaborone, lay in mourning during the night vigil (*tebelelo*).

The passages which the Hear the Word ministers selected for people to preach about at the *tebelelo* were John 11:17-27 ("I am the resurrection and the life. Those who believe in me, even though they die, will live") and Acts 9:36-41, which concerns Dorcas, a woman "devoted to good works and acts of charity" whose mourners point out the "tunics and other clothing that Dorcas had made while she was with them." Many of the church participants who preached at the *tebelelo* stressed that Tebogo had been a woman like Dorcas, whose works were like fine garments, and that she had attained eternal life through her faith. In addition, many speakers recalled Tebogo's last words, in which she had reported hearing a voice telling her that her way was open. They emphasized that she had been blessed in knowing in advance of her own death. It is striking that while people were discouraged from speaking about the possibility of Tebogo's death before it occurred, her own farewell was regarded as a sign of a particularly good death.

I now turn to a particular speech at the *tebelelo* given by a young woman, Dineo, who had been a close friend of Tebogo's in Hear the Word (see Appendix). I have selected this speech because it illustrates the language used to celebrate a good life and a good death, to insist on the value of being a believer, and to reaffirm the importance of the church in a time of suffering. Another reason I have for concentrating on a *tebelelo* speech is that I would like to try to remedy the intrinsic unfairness of an academic enterprise in which the experiences of people who are sick, poor, and relatively powerless are described in ways which the well, the wealthy, and the powerful find useful. I once asked Tebogo if she would like to make a taped interview with me, but she never took me up on my offer. After she died, others informed me that she had told them that she did not want me to remember her by the voice she had had when she was ill. I feel confident, however, that she would have wanted to be remembered in the terms in which Dineo spoke of her.

Dineo spoke "in the spirit" (*mo moweng*), that is, very forcefully in a deep-throated voice, with a rising intonation at the end of each phrase, and with a great deal of passion -- she was weeping while she was speaking. Church participants say that when the spirit enters them, they feel a force coming up from within their bodies, a force over which they have to maintain some control in order to avoid being choked and falling over. Words spoken "in the spirit" have a power over the emotions of listeners that words spoken "in the flesh" (*mo nameng*), that is, in normal conversation, do not possess.

In her speech, Dineo repeatedly quotes songs from the popular Sesotho hymnbook *Lifela tsa Sione* (Songs of Zion), indicated by quotation marks in the transcription, and attributes them to Tebogo. When I later asked Dineo whether Tebogo had actually used these words, she replied, "These are the words that I spoke for her. When I spoke, I took the position she had had in life. If she had been at the funeral, these are the words she would have wanted to say." The effect is to blur the distinctions between the words of the hymns (one of which was Tebogo's personal song) , the words of the speaker, the singing of the group, and the words of Tebogo. For this reason, I interpret this use of song as a way of making the deceased spiritually present at the *tebelelo*.

Finally, Dineo remarks towards the end of her speech that Tebogo, as a member of Hear the Word, can never be an orphan, since she continues to have "spiritual parents" (*batsadi ba moya*), meaning MmaMaipelo and her husband, and by extension the church leadership. The implication is that the church is a "spiritual family" (*losika la semoya*) which coexists with one's

"fleshly family" (*losika la senama*), but which endures forever, so that "spiritual parents" will claim a person who dies faithful to them as eternally their own. A person who has "spiritual parents" cannot die alone.[6]

The words and actions of members of Tebogo's extended family and other residents of her home village at the funeral presented a striking contrast to those of the chuch participants. In general, relations between the two groups might have been characterized as a tense compromise. It was Tebogo's family who had to pay most of her funeral expenses, since she had not belonged to the Hear the Word burial society. A different church with a branch in Tebogo's home village had organized *merapelo* services there during the week following her death, and at the *tebelelo* there was some rivalry between ministers of this church and those of Hear the Word over control of the proceedings. When I later asked members of Hear the Word about Tebogo's relationship to this other church, I was told that people in that church had not known her very well, unlike those of Hear the Word who had spent a long time in Gaborone with her. MmaMaipelo, similarly, called my attention to the words of an elderly man of Tebogo's village who remarked at the *tebelelo* that it was Tebogo's "spiritual family" (*losika la semoya*) in town who had known her best. Most of the villagers, however, spent the night around fires rather than attending the *tebelelo* at all, and church members later remarked to me that perhaps they did not attend because they were beer-drinkers rather than Christians.

Tebogo's paternal grandfather, the first speaker at the morning service preceding the burial, expressed not a conviction of eternal life but a sense of profound loss. He began by announcing that Tebogo's death had been caused by "blankets" (*dikobo*), a euphemism for sexually-transmitted disease. He went on to emphasize that her illness had started three years previously "away in Gaborone." She had been taken, he said, to medical doctors (*dingaka tsa sekgoa*), traditional doctors (*tsa setswana*), and prophets (*baporofiti*) in Gaborone, but none of them were of any assistance. Whenever she did come home, he said, she had soon gone away again; the implication being that when she came to her home village, she got better, but that when she went back to the city she got worse. "Now, my people, this child has left me. But she has not left only me, she has left my children, she has left her friends, she has left all of us." After making his speech, he walked away from the Hear the Word members who were gathered around the coffin, and appeared to have little to do with them afterwards.

MmaKefilwe, who spoke immediately afterwards in the official role of caretaker (*mooki*), seemed to have been put on the defensive. She said that when "we" (that is, the church members) had first met Tebogo, she had already been suffering from illness, and that she would get better and then worse. Only recently had her illness become devastating. However, she concluded, Tebogo had been a person who had always struggled against (*go leka*) her illness and trusted in God. Later, a minister of Hear the Word preached about the resurrection of the spiritual body, concluding forcefully that "death is not a sin" (*leso ga se boleo*), and that death was made by God so that we could enter the next world.

Such tensions continued to make themselves felt. At the burial, the Hear the Word members stood next to the grave holding the church flag, which almost never leaves the premises in Gaborone, ostentatiously claiming Tebogo as one of them. Many church members made a point of sprinkling soil over her grave; this is usually done, for the most part, by members of the extended family. After the burial, the church members made a point of washing their hands in tap water as a sign of their resignation, while everyone else washed with water that had been treated with herbs (*metsi a a phekotsweng*) by traditional healers. At the subsequent gathering of men, the church members were asked to leave before the *tatolo*, when an announcement of the cause of death is often made. Finally, during the meal that followed, the church members sat apart from the villagers, and rather than remaining to talk afterwards, they quickly departed back to Gaborone as they had arrived the previous night, in a group. Summing up the funeral, MmaMaipelo's son told me that the *tebelelo* had been a success, since none of the church members had wept as the coffin was being lowered, whereas some women of her extended family had collapsed from grief.

When I have related this account of the funeral to other residents of Old Naledi, they have speculated that the villagers might have seen the church members as having bewitched Tebogo, or perhaps have held them responsible for not doing enough to counteract the immoral sexual life that Gaborone encourages. For her part, when I mentioned the grandfather's speech, MmaMaipelo told me that he was in great grief (*o hutsafetse thata*), and that she been unable to hear whether he had mentioned sexually-transmitted disease. However, she added that she had no complaints about his involvement in bringing Tebogo to a traditional healer, because she does not want to interfere in the efforts of family members to heal the sick. About six weeks after Tebogo's death, one of her brothers (in fact, the man who played the seducer in the AIDS drama)

was baptized into the Hear the Word Apostolic Church, announcing during the service that he had been impressed by what the church had done for his sister, and that he would like it to do the same for him.

Conclusions

I have been arguing that the ways in which people understand and speak about the problems posed by fatal disease hinge on their social positions. While government officials may frame the "AIDS problem" in terms of losses to national productivity or burdens on the health care system, these are simply not the concerns of members of the Hear the Word Apostolic Church. For them, what is crucial is that their fellow church and family members not die violently and alone. More generally, death possesses potentially different kinds of social and emotional significance, so that, as in the above case, a particular death may be construed as either a profound loss or an affirmation of eternal belonging, or both.

Yet is there no common ground between the imperatives of AIDS prevention and church community? Wouldn't church members prefer not to have to watch their friends and family die? Of course. However, I would like to emphasize one important respect in which church practice conflicts directly with conventional wisdom about AIDS prevention. Many health educators stress that people with AIDS ought to be encouraged to identify themselves publicly as such, so as to let others know that they too are vulnerable, to help remove the stigma attached to the illness, and to derive support from fellow sufferers. It is, perhaps, debatable whether this conventional wisdom is in fact correct. Yet Hear the Word Apostolic Church participants do all in their power to cultivate ambiguity about the causes and nature of any particular fatal illness, especially those of their own members. In so doing, they promote a sense that theirs is a community of the dying faithful, not that it is one of actual and potential AIDS sufferers.

If the goal is in fact to encourage people to identify openly a given illness as AIDS, I must point out that on the evidence of the case presented here, health campaigns which associate AIDS with immoral behavior have backfired dramatically. At first sight, involving church leaders in AIDS prevention by encouraging them to preach about sexual morality appears to make sense. Yet when a church member becomes ill and dies, there is an imperative, at least in the Hear the Word Apostolic Church, to regard that person as a fully successful Christian, not as a sinner. In effect, therefore, the need to prevent AIDS is made to appear to conflict with the need to affirm a

church community. If Bishop MmaMaipelo is forced into a choice between warning against AIDS and maintaining a community of the faithful, she will always choose the latter. Making a good death thus emerges as a more pressing concern than preventing the spread of disease.

The material I have presented here shows that the ways in which suffering is understood and spoken about hinge on visions of community, and that it is in part through experiences of suffering that we come to know to whom, and to what, we do and do not belong. The ways in which Tebogo's illness was regarded may, perhaps, have had less ultimately to do with public health campaigns than with concerns about social reproduction which existed before the onset of the AIDS epidemic, and in terms of which AIDS is now being understood. Her sickness and death were occasions for all those familiar with her to reflect on whose child she was and is. Transforming experiences of illness and death into affirmations of community, therefore, is not a task which is straightforward or devoid of conflict, since it requires all concerned to make decisive statements about the people to whom they are committed, both in the present and for all eternity. I have devoted this paper largely to celebrating such efforts to maintain and regenerate community, and yet as I watch my friends become sick and die I worry that it may be only a matter of time before things fall apart.

Notes

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[2] For example, in letters to the editor of the newspaper*Mmegi*, the Revs. E. Baralemwa and J. Bryan Born, involved in the Ministry of Health's Botswana Christian AIDS Intervention Program, have dissociated themselves from the government's efforts to promote condoms as a way of preventing AIDS (*Mmegi/The Reporter*, 14-20 February 1997, pp. 6-7).

[3] Because of the sensitivity of much of this material, I use pseudonyms throughout.

[4] A commonly-quoted Setswana proverb conveys much the same idea: "*Lefoko ga le bowe, go bowa monwana*" (the word does not return, only the finger does). That is, a person must be careful in choosing words, because an insulting word, unlike a finger, cannot be pulled out of the ear of the hearer (Mogapi 1991:82). The identification of the person with the word being a common cultural presumption, why is it made a matter of explicit church teaching, so that, for instance, I was first evangelized by being told to repeat the beginning of the Gospel of John?

Preaching focused on the importance of the word may accomplish many things. For instance, church leaders often use the following line of reasoning to discourage members from approaching traditional healers: such healers often attribute illness to improper contact with a person in a state of impurity, such as a woman whose baby has died. According to such a conceptualization of sickness, no words are involved in transmission. Since nothing, according to church teaching, can be done without the word, it is wrong to "believe" in illnesses diagnosed by traditional healers. It is, on the other hand, legitimate in general to talk about AIDS because it is an "illness of the spirit" (*bolwetse jwa semoya*), in that it is contracted through the word of a person who suggests sexual intercourse, since "whatever the spirit desires, the flesh does likewise." TB is not contracted by means of the word, but because coughing ailments are mentioned in Deuteronomy, it is legitimate to "believe" in it.

[5] All Bible passages are taken from the New Revised Standard Version.

[6] I would like to express my gratitude to three members of the Hear the Word Apostolic Church, including MmaMaipelo, for helping me transcribe this speech.

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APPENDIX

sefela: Joale ke bone sediba sa nnete,
Sediba sa maphodi, se monate.
[Lifela tsa Sione 338]
Tshwarelo! Ke batla go gopola motho wa
Modimo,
ha kile akena gareng ga bodiba,
kgotsane motho wa Modimo,
ha a kile a fumane metse a bophelo,
kgotsane motho yo o kileng ya re a nyorilwe,
ha a tsena gareng ga Utlwang Lefoko.
Tshwarelo! (Amen.)
Ke rata ke bue ka lesole
le le kileng la re ka metlha le dipaka,
"Ruri *le nkgapile pelo,*
lefatshe le lentle lela,
ke utlwa botlhoko,
ha ke ntse ke le gopola,"
a re "dumelang ke a tsamaya,
ke ya lefatsheng lela,
Jesu o a mpitsa,
o mpaakanyetsa sebaka,
sebaka sa go dula."
A re ke a re, "A ruri le nkgapile pelo,
lefatshe le le lentle lela,
gore ke utlwa botlhoko,
ha ke ntse ke le gopola,"
a re "Jesu ena
o mpaakanyetse sebaka sa go dula."
A re "Dumelang baratiwa,
ha ke mo latela gona, ke ha eso ka sebele."
[Lifela tsa Sione 363]
Ke gopola lesole la Modimo,
le le kileng la apara diaparo tsa tlhabani,
ene [Tebogo],
ha a kile a aba jaaka lesole,
le le mo tetelong.
sefela: Se mphete wena yo o rategang,
Mmoloki wa ka,
Ha o ntse o sitsa ba bangwe,
Se mphete le nna.
Jesu, Jesu,
Ke a go rapela,
Ha o ntse o sitsa ba bangwe,
Se mphete le nna. [Lifela tsa Sione 361]
Tshwarelo, tshwarelo ya Jesu!
Ha sefela se se utlwala, go utlwala mokgwa,
kgotsane ha motho a bua,
ha a bona a tla tsaya loeto.
Mo motho wa Modimo ha a kile a baakanya,
a re "se mphete moNasara,"
a re "Jesu, ha o ntse o fa ba bangwe,"
a re le nna o mphe gannye,
a re kgotsane lesole la Modimo,
"Ntate,
a re se o no o nkadimile sona,
ha o re, ke se busetse Morena,
a re ke tla nna ke re go lokile."
[Lifela tsa Sione 110]
Ha mosadi wa Modimo ka se sebaka,
a re, "Ntate sone o nkadimileng sona,

hymn: Now I have seen the true well,
The well of good healing.[1]
[Lifela tsa Sione 338]
Pardon! *I want to remember the person of*
God,
who once entered deep water,
this person of God,
when she saw the water of life,
this person who once thirsted,
when she entered the Hear the Word.[2]
Pardon! (Amen.)
I want to speak of the soldier[3]
who always used to say,
"Really *I love it,*
that beautiful country,
I long for it,
thinking of it,"
she said, "Farewell I am leaving,
I am going to that country,
Jesus is calling me,
preparing a place for me,
a place to rest."
She said, "Really I love it,
that beautiful country,
I long for it,
thinking of it,"
she said, "Jesus
has prepared a place for me to rest."
She said, "Greetings my loved ones,
when I follow Him there, I am truly at
home."[4] [Lifela tsa Sione 363]
I remember the soldier of God,
who once put on the uniform of a soldier,[5]
that is Tebogo,
living like a soldier,
being in the promise.[6]
hymn: Do not bypass me, beloved one,
My Savior,
You have helped others,
Do not bypass me.
Jesus, Jesus,
I pray to you,
You have helped others,
Do not bypass me.[7] [Lifela tsa Sione 361]
Pardon, Jesus' pardon!
When this song is heard, it is a sign,
what a person might say
when about to set off on a journey.[8]
This person of God, who was prepared,[9]
said, "Do not bypass me, Nazarene,"
she said, "Jesus, You have given to others,"
she said please give a little bit to me,
she said, this soldier of God,
"Father,
that which You have lent to me,
when You say to return it Lord,
I will say that it is all right."
[Lifela tsa Sione 110]
This woman of God would say at times,
"Father, that which You have lent me,

go siame ke se buseditse,"
gonne e ne e le kadimo fela mo lefatsheng,
fa ke ne ke adimile, jaanong ke a kgotlisa.

Kgotsane motho wa Modimo a bua le Modimo wa gagwe [go simololwa go opela Lifela tsa Sione 110] -- tshwarelo! tshwarelo ya Jesu! -- motho wa Modimo a bua le Modimo wa gagwe,
a re "Rara, o no o nkadimile ka lengwe la malatsi,
ke tla go le busetsa."
sefela: Se o nkadimileng sona, Ha o re, ke se busetse,
Le teng ke tla leka go re: Go lokile!
[Lifela tsa Sione 110]
Tshwarelo! Mo motho wa Modimo yo ke a mo gopola, [Tebogo],
motho wa Modimo o ne a tsena ka dipheho,
gone mo tempeleng,
kgotsane o ka re o ka opela "bonang go tlhagile maru,
one a a tsosang batho botlhe,
o tla khutla legodimong,
bona go tla phuthiwa batho botlhe."
[Lifela tsa Sione 45]
Kgotsane batho ba be jwale jaaka ena,
mo motlhankana wa Modimo wa moefangedi jaaka nna,
kgotsane motho wa Modimo wa mosha jaaka nna,
o re "bonang go tlhagile maru,
a a tsosang batho kgale,
o re o tla khutla legodimong"
. . .
sefela: . . . A a tsosang batho kgale;
O tla khutla legodimong
Go phutha batho botlhe.
Alleluya! Dumelang alleluya!
Alleluya! Dumelang alleluya!
Utlwang, go tlhajwa mekgosi
E e tsosang ba ba suleng
Ba mengwa ke Moatlhodi,
Ba tswa botlhe mabitleng.
Alleluya! [Lifela tsa Sione 45]
Tshwarelo! Ke "utlwa go tlhajwa mekgosi,"
ha motho wa Modimo a kgatlhantshiwa ke perompeta,
kgotsane therone ya Utlwang Lefoko,
ha a kgatlhantsha motlhankana wa Modimo, ha a tla a kgabile "jaaka monyadwi yo o kgabetseng monna wa gagwe." [Tshenolo 21:2]
Ke gona ha ke bona Utlwang Lefoko,
ha ke gopola therone e ntle,
ke re ke gopola lekgarejwana la Modimo,
ha le kile la sepela tseleng tsa Morena, kgotsane a kile a ikgethela.
Ke gopola moefangedi wame,
o ne a tsena a thuthumela ka moya,
a re "mafika a petsoha,"
a re "dinaledi tsone di a wela"

it is good for me to return it,"
since it was just a loan on this earth,
I have borrowed, and now I am bringing back.
This person of God, speaking to her God, [people start singing Lifela tsa Sione 110] -- pardon! Jesus' pardon! -- this person of God speaking to her God,

would say "Father, You have lent me one day,
I will return it to You."
hymn: That which You have lent to me, when You say to return it,
Then I will try to say: It is all right!
[Lifela tsa Sione 110]
Pardon! This person of God I am remembering, Tebogo,
this person of God used to enter in the wind,[10]
there in the temple,
as you might sing "look the clouds have appeared,
those which raise all people,
He will stand in heaven,
see, all people will be gathered."
[Lifela tsa Sione 45]
That is, people who are like her,
a servant of God, an evangelist like me,

a person of God, a youth like me,

she said, "look the clouds have appeared,
which raise the people of old,"
she said, "He will stand in heaven"
. . .
hymn: . . . Which raise the people of old;
He will stand in heaven,
To gather all people.
Alleluya! Dumelang alleluya!
Alleluya! Dumelang alleluya!
Hear the loud calls
Which raise the dead
They are called by the Judge,
All come out of their graves.
Alleluya! [Lifela tsa Sione 45]
Pardon! I "hear the loud calls,"
when the person of God hears the trumpet,

or the glory of Hear the Word,
when she meets the servant of God,
when she comes adorned "like a bride adorned for her husband." [Revelations 21:2]
Here when I see Hear the Word,
when I think of the beautiful children,[11]
I mean I remember the young woman of God,
who has gone on the Lord's road,
which she chose for herself.
I remember my evangelist,
who entered wholeheartedly in the spirit,
saying "the hills are tumbling,"
saying "the stars are falling"

[Lifela tsa Sione 45],
o utlwala ha di a duduetsa,
ha diperompeta di lela,
o a itse ga ke itse ke ka reng,
ha ke gopola lesole.
Ke rata re bine
"utlwa go tlhajwa mekgosi
e e tsosang ba ba suleng."
sefela: Utlwang, go tlhajwa mekgosi
E e tsosang ba ba suleng
Ba mengwa ke Moatlhodi,
Ba tswa botlhe mabitleng.
Alleluya! Dumelang alleluya!
Alleluya! Dumelang alleluya!
Bonang, go tlhagile maru
A a tsosang batho kgale;
O tla khutla legodimong
Go phutha batho botlhe.
[Lifela tsa Sione 45]
Tshwarelo! Ke ne ke rata go bua kaga lesole, banna,
ke utlwa ke nna le mokgwa wa go senyega,
ha ke gopola manyeloi a a thata,
a a pepang banna le basadi.
Tshwarelo! (Amen.)
Motho yona wa Modimo ga se lesiela leha e le khutsana,
ha kene gore go tempele ya Utlwang Lefoko.
Ke ena yo o nang le batsadi ba moya,
le nna ke jwale jaaka ena,
ke re le nna ke na le batsadi ba moya, jaaka ena.
Ke re le nna ke tshwane le lesole,
ke ngaparela Jesu fela,
ke seka ka leba gope gape.
Ke rata re binele lesole,
re tsene ka natla.
Kgotsane ba ba robetseng ba tsoge,
ba utlwe ha "go tlhajwa mekgosi,"
kgotsane ke "letsatsi la dikgakamatso,
tsatsi le le boitshegang."
sefela: Tsatsi la dikgakamatso!
Tsatsi le le boitshegang!
Fatshe yotlhe le tla tsoga,
Ka le utlwa yo o tlang [Dihela 377]

[Lifela tsa Sione 45],
they are heard singing out,
those trumpets sounding,
I really don't know what to say,
when I remember the soldier.
I would like us to dance
"hear the loud calls
which raise the dead."
hymn: Hear the loud calls
Which raise the dead
They are called by the Judge,
All come out of their graves.
Alleluya! Dumelang alleluya!
Alleluya! Dumelang alleluya!
Look, the clouds have appeared
Which raise the people of old;
He will stand in heaven,
To gather all people.
[Lifela tsa Sione 45]
Pardon! I have been wanting to speak of the soldier, men,
I know that I lead a changed life,
when I think of the powerful angels [12]
which look after men and women.
Pardon! (Amen.)
This person of God is not an orphan or parentless,
going to the temple of Hear the Word.
It is she who has spiritual parents,
and I am like her,
I say that I have spiritual parents, like her.[13]

I say that I too should be like a soldier,
grasping onto Jesus alone,
I should never again look anywhere else.
I would like us to dance for the soldier,
let us enter with energy.
Let those who sleep rise,
hear "the loud calls,"
that is, the "day of wonders,
the dreadful day."
hymn: Day of wonders!
Dreadful day!
All the world will rise,
Since it hears Him coming [Dihela 377]

Notes

These notes refer to later explanations given me about particular passages by the speaker, Ms. Dineo M., in an interview conducted during August 1997.

[1] This hymn is Dineo's personal song, which she usually sings before starting to preach. She told me that the water to which the song refers is the well that God showed to Hagar (Genesis 21:19: "Then God opened her eyes and she saw a well of water").

[2] On this passage, Dineo commented, "Tebogo had suffered from illness ever since she was a small child, and she saw that it was her duty to go to church for the water that heals each and every person. She was in fact healed when she came to Gaborone and entered the Hear the Word Apostolic Church. As it says in 2 Corinthians 5, 'If anyone is in Christ, there is a new creation: everything old has passed away.'"

[3] "A soldier is someone who fends off bad words or intentions, so that she does no evil. Tebogo has defeated the devil, and now her war is over."

[4] "These are the words that I spoke for her, in place of those she actually spoke. I took the position she had had in life. If she had been there, these are the words she would have wanted to say."

[5] "The uniform of a soldier is the church uniform."

[6] "Living in the promise is like going to Babylon with God, as in Jeremiah 40:4." I have often heard Jeremiah 40:4 interpreted in this fashion: God has released the prophet from the fetters on his hands, and it is a matter of his free will whether or not to go to Babylon, the promised land, where God will take care of him.

[7] "This song was the way Tebogo used to praise God (*mopaki wagagwe*). Its message is like that of Matthew 5:5 [Blessed are the meek, for they will inherit the earth]: everyone can come to Jesus for healing."

[8] "As it says in Job 17:1, 'My spirit is broken, my days are extinct, the grave is ready for me.'"

[9] "Being prepared means living a new life." Dineo told me that she did not mean that Tebogo had been preparing for death.

[10] "Being in the wind means being in the spirit. As Jesus says in John 3, 'The wind blows where it chooses, and you hear the sound of it, but you do not know where it comes from or where it goes. So it is with everyone who is born of the Spirit.'"

[11] Dineo explained the word *therone* as referring to glory, kingdom, or small children about age 5, as in Mark 10:14, in which Jesus says that the kingdom of God belongs to little children.

[12] "By angels I mean the spirit that works (*mowa o o berekang*)." I have been told that singing one's personal hymn in church brings angels (*manyeloi*) that give one the strength to preach in the spirit.

[13] "By spiritual parents I mean Mme Bishopo and Rre Bishopo [i.e., MmaMaipelo and her husband]."