What We Bring With Us and What We Leave Behind: Six Months in Post-Apartheid South Africa

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WHAT WE BRING WITH US AND WHAT WE LEAVE BEHIND:
SIX MONTHS IN POST-APARTHEID SOUTH AFRICA

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**DONNA FUTTERMAN** is a professor of clinical pediatrics at the Albert Einstein College of Medicine and the Director of the Adolescent AIDS Program (AAP) of Children’s Hospital at Montefiore in the Bronx, New York. The AAP was the first program in the nation to offer comprehensive care to youth with, and at risk for, HIV infection, and continues to provide leadership, combining care, research, outreach, and training. Donna has published widely on the care of these youths, and is the co-author of *Lesbian and Gay Youth: Care and Counseling*.

**EVAN CASPER-FUTTERMAN** is a senior at Fieldston High School in the Bronx, New York. His current passions are history, international relations, and ultimate frisbee.
Imagine if there had been television when the U.S. separated from England in the eighteenth century. The news would have been filled with stories about the new developing nation. In a sense, that’s what it’s like here. I hear the intricate details of what it takes to create a complex democratic republic after fifty years of apartheid and struggle, and can even be found watching “Parliament Live!” on TV when I get home from school at 15:00.

– Evan: Family Letter #3

As South Africa completes the first decade of democracy, an ongoing dilemma boils down to this recurrent theme of massive change: What does a society bring forward as it moves from the past into the future (Swartz, 2001)? During the six months we lived in South Africa, we found ourselves faced with parallel questions: What do we bring with us, what do we leave behind? Who are we while we are there, and with what do we return?

Besides two duffel bags each, here are some other things we brought with us: Donna and Virginia had histories of supportive work for South Africa during the struggle years, and Donna had family ties in Cape Town. We both had skills to contribute. Donna is a physician specializing in HIV-AIDS and was able to join a team of the Provincial Health Department in the rollout of a program to prevent maternal-to-child HIV transmission. Virginia’s expertise is in early care and education. She worked with a small NGO (non-governmental organization) writing a course for infant and toddler care practitioners while spending time in childminding programs. She also joined a team at a weekly infant mental health clinic in Khayaletisha, a large township on the outskirts of Cape Town.

Why did our family, two mothers and a teenage son, choose to spend our academic sabbaticals living, volunteering, and going to high school in Cape Town, South Africa? It’s true, the grown-ups wanted to get away. Evan, having just adjusted to high school in New York City, did not. Nor was he particularly keen on attending a Jewish day school, even if it was at the tip of Africa. The notion of wearing a school uniform didn’t sweeten the deal in any way.

One of the experiences we sought was to live in a society in which white people were not the majority. In fact, there were many other places we might have gone, or stayed for such a challenge: like Detroit, or even closer to home, the Bronx. But for ourselves, and for our son, we wanted to experience the transformation of
the new South Africa, not as tourists, but as participants, if for just six months. Perhaps most of all, we wanted to provide our son with a message that can be difficult to hold on to: New York City, U.S.A., is not the center of the world.

**NO LONGER TOURISTS**

It took almost a month to make the transition from being tourists to becoming residents. People categorized us in unfamiliar ways, ways with which we were not always comfortable. Although envied, while at the same time slightly resented, we were Americans and knew we always would be. But for those few short months we were differently American—we were the outsiders. Once we began work and school, the seemingly small customs, phrases, and units of measure that we thought “interesting” or “funny” quickly became part of our daily landscape. In the first few weeks, we wrote the following to describe our new lives:

> The biggest change for us has been a wonderful one—the physical environment. The staggering beauty of Cape Town is immediately apparent and continues to fill us with joy and renewal. For the first month of our stay, we have had one car, one cell phone, and one set of house keys. This has made for a closely knit family! We are ready for some individuation, which is starting as we write. Just today, we joined a “lift-scheme” (car pool, not pickpocket ring) for Evan’s transportation to school and back. The three tenth-grade girls in the scheme are great interpreters of the culture, including preparing us for the summer weather: gale force summer wind storms that last a few days, followed by hot, dry African heat. Fires on the mountains that surround the city round out this provocative season.

> Another huge difference in our lives is that our family has dinner together every night, and it now feels like the normal thing to do. The result is that we have grown together in some new and wonderful ways. We have helped each other on a few rather trying days when we needed counsel to make sense of our experiences.

> – Donna & Virginia: Family Letter #1

For two weeks during our stay, we actually were tourists—visiting Soweto, going on safari, and staying in a rural Zambian village. A city girl at heart, I (Virginia) found myself paralyzed by rural African poverty in a way that even extreme urban settings could not begin to approximate. Whatever deeply submerged
romantic notions of Africa may have engaged us evaporated in the heat of the day and the pace of our visit to an 800-year-old Makuni village. Here’s how we described it at that time:

The village is one of the “richest” in Zambia. Water pumps have recently been installed, providing improved sanitation and saving hours of work for the women. Yet even here, rural poverty is astounding and the HIV medicines in the local clinic, which also serves as a hospital, consist of a mostly empty bottle of Bactrim. In Zambia, we stayed in an inn modeled after a traditional village and learned more of the local history. Evan ate with the men, sitting on stools, while Donna and Virginia sat on the floor with the women. We had a delicious African meal with our hands, scooping up the mealie and stews.

– Donna: Family Letter #3

As tourists in Zambia, we encountered specific facts and stories designed to teach us about the culture. Eco-tourism at best, “designer tribalism” at worst (Sandall, 2001), these explicit lessons about the power of Victoria Falls and the roles of men, women, and tribal leadership were clear and poignant. We all appreciated the direct experiences of ancient practices. However, I kept feeling like a spectator—one consumed by the ever-present threat of malaria. By contrast, in the peri-urban Western Cape, there were fewer cultural brokers to answer our questions. We found ourselves scratching our heads more in our everyday life there than in rural Zambia. Yet there was something about the process of groping our way through work and school, making contributions as well as mistakes, that allowed us to feel a part of the society as we “learned about” it.

THE TOWNSHIPS/CAMPS BAY

Even before we began our work in the townships, we spent some time there as a family, and accompanied Evan to his community service work with Habitat for Humanity. In the predominantly white parts of Cape Town, mostly English is spoken. In the flats or the townships, English falls by the wayside, replaced by Xhosa, Afrikaans, and nine other official languages. Under the new government, homes are being built at a tremendous rate, but the ANC (African National Congress) cannot keep up with the overwhelming needs. Evan was struck by the way life in
the informal settlements felt like another era:

The township of Khayelitsha is a microcosm of this country because of its relative newness and the many challenges it faces. Khayelitsha literally means “new home.” Most of the older townships have a more settled feel than Khayelitsha, which seems the most alienated and desolate, from what I have seen so far. In Khayelitsha, there is no real evidence that the modern world exists except for the cars and the music that blares from a few stereos. Many people do not have electricity, and many who do, get it by running dangerous wires from the power lines into their shacks. There are only a few trees, and children walk around barefoot in the unpaved streets or to the outhouse or water tap. Outdoor butchers (where people buy their meat because the nearest supermarket is at least fifteen kilometers away) grill whole sides of sheep and cow in a metal drum. There are also cows, dogs, and goats on the side of the road that don’t appear to belong to anyone. People walk everywhere and women carry bundles on their heads, although not every woman, as is the African stereotype.

– Evan: Family Letter #1

The disparity between the poverty of the townships and the wealth and majestic beauty of Cape Town makes for stark daily contrasts. The economic and racial gaps remain huge in what is still, in terms of housing, an almost completely segregated city. We lived, for example, in Camps Bay where the mountains—a stately dozen of them called The Twelve Apostles—come right to the edge of the sea. We could hear the ocean at night and in the morning. European tourists frequent the oceanside cafes, and in summer you can almost forget that this neighborhood is in Africa. To work in the townships and return to Camps Bay for supper is one of the strangest sociopolitical acrobatic tricks imaginable. As we came to understand, the best way to move through these immense contradictions is to forge connections with people who live in the townships. We didn’t ever get used to this bizarre commute, but the many contradictions eventually become integrated into a way of life. Midway through our stay we wrote:

In South Africa, the slang for the state of the economy is 7/11—seven rand to the dollar and eleven to the pound. Or, as the South African Airline steward said to us before we deplaned in December, “The dollar rocks.” Unemployment
in the townships is about forty percent. When we work at the computer by
the window, men and women often catch our eye, and within seconds are
at the door asking for food, money, or work. Even among the middle class,
the poor economy is felt daily. We have joined the economic zeitgeist, despite
our favorable currency, and find ourselves practicing small habits that are
not our custom, such as washing plastic lunch bags and reusing them. Phone
time, petrol, air travel, and anything imported are extremely expensive,
yet anything related to labor is so cheap it makes us uncomfortable. What is
valuable and what is not continues to grab our attention.

– Virginia: Family Letter #2

“NO SUCH THING AS A [XHOSA] BABY”

Given that we were in the midst of so many groups with varying linguistic and
ethnic origins, it makes sense to talk about our appreciation of the cultures, not
the culture of South Africa. My (Virginia) immersion in the Xhosa-speaking and
the Afrikaans-speaking communities was through the lens of the infant/toddler
childminding world and through an infant mental health clinic. I certainly never
expected to find a “Xhosa baby” (Tomlinson, 2001); that is, that babies raised by
Xhosa-speaking families would behave a certain way. Like Donna and Evan, I tried
to observe differences that would help me to better participate in a world that has
some similar, yet so many different challenges from our own. We lived with this
healthy tension—wanting to stay open to variation and difference without getting
stuck in objectifying generalizations.

Both Donna and I had noticed that you could literally hear a pin drop in the
pediatric clinics and birthing centers. Young children sat quietly with their mothers,
who were also still, for hours at a time. How should we interpret such a powerful
silence that so contradicts our experience in pediatric clinics in America? Initially,
it felt to me like a combination of stoic endurance, with more than a hint of depres-
sion and resignation. At such moments, it seemed as though apartheid was still in
full force. Over time, I became used to the quiet, but I didn’t really understand it.
The stereotyped image of the strong, silent African woman was never far from my
mind. I also knew that self-restraint and obedience were important goals that South
African parents identified as crucial for their children’s development (Barbarin &
Richter, 2001). Then, one day, after the clinic had been closed for a two-day holiday, it was so packed that one could barely move. The waiting room became as loud and noisy as any in the States. Throughout our six-month stay, this seemed to be the case: Just as we came close to naming what appeared to be a significant cultural difference, something else came along that proved to be the exception.

Paralleling the enigma of silence were my ongoing conversations with staff at this clinic about ways to engage the youngest children while they waited to be seen. “Queue education” was something the early childhood world there had already identified as a need. These toddlers would, after all, be attending school one day, and preschool experiences were only for the lucky few. Ultimately, however, what staff and mothers decided they wanted most was a way for those in an HIV-positive group to make money. We initiated a doll-making workshop so they could learn a skill. The months of conversations were not lost time. We learned what we each thought was important and found a way into each other’s hearts.

COMMUNITY VIOLENCE AND THE MONDAY EFFECT

“There is no safety.” (James Baldwin)

It took the first few weeks of visiting early childhood programs in neighboring townships and in the wine country to even know what questions to ask. And some answers I (Virginia) thought I understood were challenged when the very same childminders we had visited came to a pilot of the course I had written for birth-to-three practitioners. In my early visits, I had repeatedly asked the same questions of caregivers as I prepared to write a course that would focus on early emotional development. To the question, “What is the most difficult part of your work?” a number of practitioners responded by talking about how hard it was to settle the babies and toddlers on Mondays, after the weekend away from the program. Initially, I took this information at face value (Mondays are surely a universal challenge) and did not at first comprehend the magnitude of the problem. They said it took most of the week for some of the toddlers to calm down. By the time we piloted the infancy course, I better understood how deeply violence permeates the society. With only one probe, a now obvious fact was opened up for discussion: toddlers, and especially babies, experience widespread chaos, neglect, and/or family
or neighborhood violence. Clearly, this occurs often enough for the widespread “Monday effect” referred to so often in my travels. Personal and public violence seem to merge into an ambiance of fear, giving the mental health diagnosis CTSS (Continuing Traumatic Stress Syndrome) that arose during the struggle years an enduring relevance.

Although I had a number of brushes with violence as an observer, my primary education about violence in Cape Town was firsthand. A pivotal experience of my stay lasted thirty seconds but is imprinted forever in my body and mind. The morning of the carjacking we were early for our weekly infant mental health rendezvous. Four of us, in two different cars, sat chatting while we waited for an African colleague at what turned out to be a flashpoint for armed robberies in Nyanga Township. Four armed gunmen, at each of our windows, forced us out of the car. Afterwards, pistol whipped and dazed, we wandered the streets of Nyanga until we were surrounded by a group of twenty locals, mostly women. They formed a protective circle around us as we searched for a telephone.

For our family, my experience of trauma and physical injury gave violence—one of South Africa’s largest problems—greater emotional depth. I still see the attacker’s face in my mind, perhaps because he was only a few years older than my son. His mother, too, is on my mind, as she has clearly lost him. I like to think of myself as a relatively secure adult who can rely on a substantial safety net. Knowing what I went through for months after the attack puts crime statistics about developing children into frightening perspective. In a survey of 540 children, ages five through fifteen, who were living in the township of Khayelitsha, all had experienced some kind of violence or trauma in their lives. There is nowhere near the level of police protection in South Africa that we have come to expect, if not at times feel ambivalent about, in the U.S. The lack of police protection leaves everyone feeling vulnerable. My South African colleague writes:

As a new society, we require protection in the same way that an infant and young child need the presence of functioning parents in order to grow. . . .we need outside, visible control, not to enforce inhuman legislation, as in the past, but in order to allow the people to develop their resources and gain skills in a protected environment. (Berg, 2001)
Not until I was back home for a full week did I begin to feel the safety mapped into my brain from a lifetime on the streets of New York City. At the same time, I recognized that the personal experience of violence helped me better understand the ultimate contradiction of the new South Africa. While democracy created a new political balance of power, the basic economic inequities remained essentially untouched. The effects of apartheid will last many generations.

**“ISTIGMA,” “IDISCRIMINATION”**

The AIDS epidemic is yet another critical challenge faced by the South African people. Staggering numbers are already infected—in some Western Cape townships, twenty percent of the pregnant women are HIV positive. While we were there, a program to prevent mother-to-child transmission of HIV was begun. Although this program is a straightforward care and prevention effort, in working with the Provincial Health Department, I (Donna) was impressed with its complexity and the difficulty of deciphering which components of the Western approach to fighting AIDS would work and which were irrelevant.

*The problem of mother-to-child transmission has so many layers. The simplest part is giving the medicine—Nevirapine. The two-dose regimen is perfect for a public health effort and can decrease transmission rates significantly, from twenty-five to forty percent to less than ten percent. The mother takes one dose when she begins labor, and the baby takes the other within hours of life. But before this can take place, a system must be developed to counsel and test thousands of pregnant women and to inform one in five that they are HIV positive. After the medications are given, the problem is not yet solved. The majority of women in Africa breastfeed—a practice that is known to transmit HIV, yet is a deeply important part of their motherhood. Clearly, to prevent HIV, the best alternative would be formula feeding. But formula feeding serves as an assumed marker of HIV infection and, because of stigmatization, AIDS remains a secretive and rarely disclosed disease. Dr. Glenda Gray, a South African pediatrician, called the breastfeeding challenge “a conundrum of complexities.” In addition to helping each mother make a decision about her feeding choices, the government and clinics must create a system to distribute formula, as well as monitor the mothers’ and babies’ health. All of the babies must be retested at nine months to see which
are infected and need ongoing care.

- Donna: Family Letter #2

Implementing just this one public health intervention requires massive amounts of work, resources, and training. As everywhere else, the fight against AIDS is not solely a medical one, but must be engaged at every level of society. I attended a candlelight service at the Guguleto Sports Centre. It was organized by Sister Mabel, a nurse who is working with her church to “break the silence” about HIV. A powerful choir led the audience in hymns between each of the speeches. I stood awkwardly swaying and clapping until someone handed me a hymnal. Then I sang along in Xhosa. The music is deep from the heart of humanity and, as gospel, felt intensely familiar. People spoke from both victimized and empowered perspectives. The Xhosa language is adopting many new English words and identifies them with the prefix “I.” Thus the activist speeches, interspersed with words like “i-discrimination, i-stigma, and i-empowerment” were readily understandable to me, the only non-Xhosa person present.

We were drawn to South Africa because we anticipated that a country in the process of rebuilding itself would be a very engaged place. That expectation was continually fulfilled. It was powerful and sobering to participate in the fight against this epidemic in the country with the most cases of HIV of any in the world.

**A PUPIL IN CAPE TOWN, A STUDENT IN NEW YORK**

The effects of apartheid on the white population are starkly different from its effect on the black majority, but are significant nonetheless. An authoritarian educational system is hard to transform and its effects can be seen from preschool through post-graduate education—this, in spite of a countrywide attempt at a more process-oriented, outcomes-based educational model. For Evan, who attended what is viewed as a more educationally progressive school, the contrasts with his U.S. experiences were stark.

*What is the difference between a pupil and a student? What I have discovered through my handy pocket dictionary is that a pupil is someone who is being taught, as opposed to a student, a person who studies, from the Latin root for zeal. The class periods here in my school are called Lessons,*
which also emphasizes that the student is being taught, not just learning. On the other hand, one does not “study” for the many, many tests we have here—one “Learns.” Preschoolers are called Learners and those at university are Students. Another interesting practice—compulsory standing up when the teacher enters the room. This is especially interesting for me, because in the States . . . respect for the teacher is voluntary, shown through enthusiasm, participation, and politeness. Here, standing is a mandatory sign of respect for the teacher.

– Evan: Family Letter #2

The Dutch called Cape Town “The Mother City.” Now, centuries later, we found ourselves, two mothers and a son, living in the Mother City. And what’s the first question Evan was repeatedly asked at school, “What does your father do?” We began to wonder about the popularity of this question and came up with a number of explanations. Because of the sanctions apartheid brought, South Africa was sequestered from much of the “progress” of the rest of the Western world. Television arrived in the seventies. Seat belts are considered a nuisance by most. Toys are displayed in the main drugstore chain in “Boys” and “Girls” sections. A “fifties” feeling is pervasive in the European and white sections of town. Yet, South Africa is the only nation in the world where gay rights are provided for in the constitution.

A white American high school student living in Cape Town was seen as a bit of an oddity. There certainly weren’t many others. The traffic is largely in the other direction, as many white high school students concentrate on their math skills to enhance their possible acceptance to U.S. colleges. We stood out anyway, as just about every family we met—from the townships to the upper-middle-class suburbs—had at least three children. Evan deduced quickly that if being an American and being an only child was an oddity, having two mothers wasn’t about to change that impression. He was challenged to decide if, when, and how he would come out about his family. The truth of his family composition proved to be less of an issue than anticipated when he finally did break the news. The experience of feeling held back by it, however, was new for Evan and for us (Virginia and Donna).

COMING HOME
I’m fascinated by the perspective gained from hearing about world news from the African point of view. There is more about global issues, along with local reports from South Africa and other parts of this continent. After watching news here, the U.S. now seems so much more self-involved; almost like the networks are in news cruise-control mode! As a result of our time abroad, we feel more connected to the rest of the world, especially Africa, and even Asia and Europe.

– Evan: Family Letter #3

Needless to say, leaving new friends and colleagues in South Africa and taking up our reconceptualized lives in the United States has been difficult. While away, we clearly lost the sense of what it means to assume a basic safety in our lives—a lesson, unfortunately, we have had to draw on many times since our return home. Despite all of the challenges, however, we felt vitally connected and engaged in South Africa. Our work was appreciated and seemed to make a difference. All this we are privileged to take back with us to the States.
REFERENCES


