

The Memory Box Project

Eight out of every ten children in the world whose parents have died from AIDS live in Sub-Saharan Africa. In Kenya alone, 890,000 children have lost one or both parents to the disease. In effect, AIDS has threatened the well-being, and in many cases the survival of a whole generation of children. The deep-rooted kinship systems that exist in Africa have endured many severe challenges in the past. These systems, however, are being stretched to their breaking point by the AIDS crisis. Because the impact on these children is so monumental, most NGOs dealing with AIDS orphans have focused their efforts and resources on much needed material support. Little or no help has been offered to support children in grieving the immense loss that occurs when a parent dies.

For children of parents infected with AIDS, the emotional impact begins in the illness phase; children are required to not only manage aspects of their own lives that they are developmentally unready to do, but often to take on caretaking roles as well. When the parent dies whatever stability continues to exist for them collapses. They are left feeling tremendous fear, anxiety, and despondency. It is hard for them to trust that their futures hold hope.

Children, in all cultures and situations, go through a multilevel grief process. This process moves through emotional stages that include denial, anger, depression, and finally, a level of acceptance and peace with their loss that comes from fully taking in, or integrating, both their own emotions and a full sense of the parent who has died. This level of acceptance allows the child to continue on with their lives with resiliency, trust and capacity for joy. A child needs support and structure to grieve fully and well. In most cases, for orphans in Africa, the fight for survival does not allow time, or resources to support this process.

One approach that seems to be helping African communities support their orphaned children in grieving was developed in the mid-1990's in Uganda and is called the Memory Box project. Memory Boxes are physical objects created by families with the assistance of a volunteer facilitator, in which they store family memories in the form of letters, photographs, stories, and other objects that have significance for a family and its history.

Memory Box Protocol

Purpose

There are two important functions of a Memory Box for families confronting the loss of a loved one or grieving the loss of someone who has died.

- 1. The actual process of creating a memory box is, in itself, supportive of the grief process or the anticipatory grief process because family members sit together with a facilitator and share memories and feelings about their loved one as they create the box.
- 2. The finished project memorializes the person, acknowledging their value and importance to the family. The object itself supports the remembering of the person as a part of their history and their lives.

Process

A volunteer works with a family as a memory facilitator. This is a very important role and requires significant cultural awareness and sensitivity to emotions and family dynamics. It is important that volunteers be as authentic as possible and focused, with empathy and kindness, on the needs and concerns of family members. In the succeeding pages, procedures are outlined to guide the Memory Facilitator in their work with a family. Supporting information follows in addendum form.

Before approaching any family the facilitator needs to take time to develop a good understanding of the community they are working in, and the larger cultural context the community exists within. Consider these questions as you observe, listen, and learn:

- How many people live in this community?
- Who are the community leaders?
- How many community members have died from AIDS?
- How many are currently ill with HIV/AIDS?
- How does the community deal with their losses?
- What kinds of supports are there for grieving families?
- How has AIDS impacted this community?
- Are community members' willing/able to talk about HIV/AIDS?
- About death and dying?

Once the volunteer facilitator feels that they have a good understanding of the community in relation to this issue, they can select a family to work with.

They can choose:

- 1. A family in which a child/children have already lost a parent to AIDS and is being cared for by a grandmother or other family member, or
- 2. A family member in which a mother is ill with AIDS. It is not appropriate to talk about death, only the individual who is being memorialized.

A first visit with a family with a translator begins with a conversation about Memory Boxes. The facilitator/translater explains the purpose of a Memory Box and introduces the process. It is important that family members are helped to anticipate the likelihood that a range of emotions will surface as they work together on the project. Children are especially likely to feel afraid, insecure and confused when a parent is dying or has died. The facilitator must be accepting of all the emotions that arise, and help the families to be kind and compassionate toward themselves. (See Addendum A for guidelines on facilitation skills)

When the family understands what a Memory Box is and the purpose of making one, the facilitator must get a clear agreement from the family that they want to work together on creating one. The volunteer's role is to: be the impetus behind the project; to bring honor to the family by visiting them; record and write a family tree; take photographs; and to take notes and transcribe the translation of the interview.

The discussion then turns to what family members might want to include in the box. The facilitator takes notes and can also make suggestions if a family seems to need some help thinking about possibilities. Suggestions might include: letters (already written or written expressly for the box), Ids, old photos, drawings that children do, family stories, poems, etc.)

A note on supplies

Actual [boxes may not be available for the project so volunteers can bring manila envelopes, decorative envelopes, or large flat envelopes. Some have made cloth "envelopes" with a button clasps.]

The facilitator can take a photo with a digital camera. Please make sure that you make notes the names of each photo. Everyone likes to have their families included in the pictures. It's very disappointing when volunteers say they will send photos and don't so they often don't trust that they'll ever see photos. Everyone loves to have photos immediately. You may want to consider bringing a Polaroid camera and film.

If you have a good quality tape recorder, I highly recommend taping the interview. The client's voice is a nice thing to preserve, and they almost always want to sing (a heart wrenching hymn that'll move you to tears). They have tape recorders somewhat available but it's also a nice donation. Everyone knows someone who has a tape player, so they could arrange to borrow it and listen to the tape periodically, and it should last years if it is stored properly and not played a lot. Don't use mini-tapes, because there is no way to play them later. A nice thing about taping is that you can refer to the tape when transcribing. If Volunteers would like, they should take card stock paper for an heirloom family tree (and colored pencils, stickers, etc, for decorating the document) If not card stock, at least have some blank paper.

First Steps....Create a Family Tree

First, create a family tree. Allow up to about 45 minutes for this, and involve as much of the family as you can (especially elders). We have included a template to use as a draft and an example. Print as many blank templates as you would like and bring them with you so that you have guidelines to use.

Start with the client's children. List the client's children, oldest to youngest, left to right, with birthdates (years) and dates of death.

Above them, list the client - father (on left) and mother (on right). On the same horizontal line, add father and mother's brothers and sisters, with as many dates as possible (between father and mother write date of marriage)

Above the male line, write the father and mother (you might want to gloss over the brothers and sisters at this point – it gets a little crowded!)

Then do the mother's side.

Keep going, as many generations back as possible. Add the client's grandchildren below each of his/her children, including the spouse, with date of birth/marriage/death. Generations are added for as long as they are remembered.

At each stage stop and show the client what you are doing, explaining each side of the family, each generation. When there are dates that are left blank, encourage the clients to fill them in when they talk to elders in the future. (It might be helpful to write b. and d. under each name, whether the dates are known or not, to encourage further documentation) of the birth and death dates). Do NOT assume that you know the spelling of names. If the client can spell the names, that is best. Translators are not always knowledgeable about names, either. You are creating a document that will be in the family forever. Although it is tedious, it is best to ask for spelling of

all names. (ie. Josh is Joash...Bernard is Benad) Take the rough draft back to your hut, and create a final draft to give to the client later.

After the family tree is done, ask whether or not the client wants the rest of the interview to be conducted without other family members present. Encourage children to leave, especially if you are using a tape recorder. If you take blank paper and crayons, ask the children to draw a picture of the client, to include in the Memory Box (bag, envelope)

Two native-speakers can conduct the whole interview, record everything in the mother tongue, and transcribe in their language as well. I have found this to be unsatisfactory because I did not understand most of the conversation, and could not interject questions and ask for clarification. The interviews I have participated in like these were short and the information gathered was disappointingly incomplete.

The preference is for a native speaker to conduct the interview, stopping at appropriate times to translate as exactly as possible for the volunteer to record as exactly as possible. It is best to not rely on the tape, but to get it all down on paper. If it is a new translator to the Memory Box Project, take some time to explain the technique and encourage them to translate often so that nothing is lost.

Encourage the translator to speak in the first person when translating, as that keeps him/her from generalizing too much. It is disheartening to have the client speak paragraphs, and have the translator say one sentence. If possible, have the translator be familiar with the questions before beginning the interview, so that he/she can adapt the questions to the circumstances, keeping the interview informal and flowing, and not just read a list of questions. Begin most questions with, "Tell me a story about..." or "Tell me about..." and avoid questions that can be answered with yes or no.

Sometimes you may need some clarification to make the question make sense. It is ok to offer some suggestions. For instance: "When you were a child, what were you like?" You can say, "Were you helpful? Did you get into trouble? Did you like to play with your friends?" At home that night, transcribe the interview, using the tape to fill in any blanks, although it really is best to write everything down as it is being translated.

Facilitator takes notes and guides the process. Symbols are used for boys and girls, males and females. (g, b, m, f.) For each person, the full name is recorded, a nickname if there was one, and the full date of birth. The family is asked to collect the items they want to include by the next meeting to have for their Memory Box.

The Memory Box

In the next visit, the family brings together the items they've collected and talk together about each of them. They decide together what they will include in their box. The facilitator encourages the family to include a family history in their box, in the form of a letter or other memories.

- Family members and /or family friends tell the history of the family in the presence of the children. The translator asks the questions and the facilitator takes notes as they share.
- The interview is tape recorded to read later for additional transcribing.

The facilitator works on the information provided from the interview and on the tape and presents a draft of the family history for family members to add to or edit. After a final revision,

pictures can be added, and the history is presented to the family to be included in the Memory Box.

In a final visit, the family gathers all the items to be included in the box, including the history, family tree, a box, and materials they wish to use to decorate the box. They decorate the box and add their objects as they talk with the facilitator about their process together and what the box itself means to them. They decide, as a family, where the box will be kept and make a commitment to care for it.

Guidelines for Memory Facilitator

Allow the family, as much as possible, to guide and direct the conversations you engage in with them. Be patient and reassuring. You are there to support them in their own very important process.

Use kindness and humor. Encourage them to say more, to express themselves as much as they are able to. Create a lot of spaciousness in the environment by being open, non-judgmental and interested in what they share.

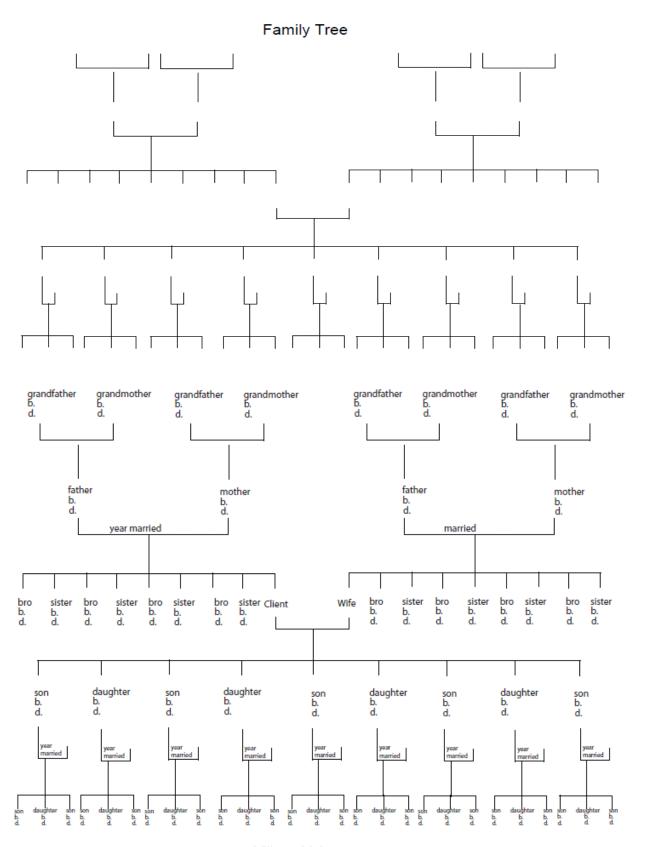
Take whatever time is needed for the process to unfold. Let them work at their own pace. The structure should support the process, not define it. Again, be guided by the comfort level of the family members. Listen with your heart as well as your ears. Be aware of body language, inflection, what is not being said as well as what is. Be as relaxed, sensitive, and open as you can be.

Interview Guidelines

A semi-structured interview is recommended. Bring along a set of questions, allowing space for other questions to emerge as the family members share. The facilitator allows the family members to say what they wish to say, the interview is their family history, and the story of their loved one. It means a great deal to them. Topics will include early childhood, education, first job, relationships, family customs and holidays, etc.

Possible questions for a family with a member who has died or the person who is ill:

- Tell me what you were like (was she) like as a small child? What do you remember about your (her) childhood?
- Tell me about your favorite memories?
- What relatives and friends have been special to you (her)?
- What were you (was she) like as a teenager? Who were your (her) closest friends?
- Did you (she) attend school? Where? What were your (her) favorite subjects? Did you (she) have songs you especially liked?
- Would you like to sing it so we can record it for your children?
- How did you (she) choose your (her) children's names?
- What do you remember about the days your children were born? What have you liked about being a mother? (What did she like)
- Tell me what you would like to tell your daughter or son about being a parent?
- What are (were) your (her) skills or talents?
- Is there an outfit you (she) just loved? Describe it.
- How about a favorite story? Food?
- What is your greatest hope for your children's future? (What were her hopes for her children?)
- What advice (would she have liked) would you like to pass on to your children?



Village Volunteers 206.577.0515 • info@villagevolunteers.org www.villagevolunteers.org