

Bright little Boy conceals a secret that would cost him his friends

He presses the candy-coloured cellphone to his ear, inclines his head and listens intently. He nods and replies.

"Put that phone away or I'll toss it in the rubbish!"

He glances sideways at Mrs Mazibuko, standing as solidly as a church steeple in the middle of the room, her index finger outstretched. With one hand the seven-year-old calmly flicks the toy phone shut and slides it into his shirt.

As soon as Mrs Mazibuko turns towards the blackboard, Boy pulls out the phone again. Ducking behind the back of the child next to him, he punches a few of the glued-on numbers and makes another call.

"Boy!" Mrs Mazibuko's voice booms in the small room with its chipped walls and worn desks.

One week into the school term and Mrs Mazibuko heaves a weary sigh, an image of the school year stretching before her mind's eye with Boy, this "hyperactive child", taking centre stage. If his first-grade teacher hadn't told her, she would never have guessed that Boy is HIV-positive.

The siren rings. The children jump up and half head for a large plastic bucket next to the teacher's desk. Each takes a peanut butter sandwich supplied by the school-feeding programme. Their uniforms are age-worn and frayed. Boy takes no notice of the bucket. He strides through the door holding a sandwich, a bag of crisps and his toy cellphone.

In the yard, Boy commands a small audience wanting a go on the phone. In his long-sleeved shirt, tie and pleated grey flannel trousers he resembles a salesman, pitching the virtues of one model of cellphone over another. None of the children knows that Boy "has this thing", the virus that causes Aids. If they did, Boy is convinced they would tell his friends "and they tell their parents and they will say they mustn't play with me".

His first-grade teacher, Mrs Hlongwane, told Mrs Mazibuko before the start of the school year that Boy has HIV. Boy's mother, Stella, told Mrs Hlongwane, but she had suspected for a while that the child was HIV-positive. "Boy told me many stories about a support group. I put one and one together."

She told none of the pupils or the other parents. "Some of the kids would be puzzled. Some of them won't be puzzled. The kids know about this thing. They see it on TV or on the radio," she says. The parents are a different matter.

"Some parents would take their kids out of school. It's because of the parents that some of the kids would not play [with positive children], not the kids. They have no problem."

Boy is one of 40 pupils in Mrs Mazibuko's second grade class. When Boy reads in Zulu, his voice is twice his size and full of authority. During the English lesson Mrs Mazibuko asks the children to touch their ears, nose, head.

Boy gives himself a good whack on the head and rubs it, grinning at his own private joke. When she asks them repeatedly to stand up and sit down, Boy holds on to the edge of the desk and catapults himself out of the small plastic chair again and again.

It is hard to believe that this is the same child who was ill a month before. Stella says he was admitted to hospital as much as twice a month in the first 18 months of his life.

"He grew up in hospital," she says. When he was about five and in Grade R, he often had diarrhoea and would mess himself in class, his Grade R teacher told Mrs Hlongwane. But, throughout first grade, he was not a sickly child. Of the 57 pupils in Grade One, he was one of the brightest and naughtiest.

None of the other parents or relatives of the children in Mrs Hlongwane's and Mrs Mazibuko's classes have come forward to disclose their children's HIV status to them. But they assume that many more carry the virus.

"At that age I suspect that some of them have it because their mothers are young and most of the young mothers have it," says Mrs Hlongwane.

Even though stigma is "not like it was before", the teachers say, even though "this thing affects everybody" in the community, no one wants to talk about Aids openly. Mrs Hlongwane has not told her colleagues that her 30-year-old daughter died of Aids-related causes two years ago.

As the siren marking the end of the school day sounds, Boy is the first at the school gate, choosing sweets from the wares on display. He ignores the apples for sale, even though he will tell anyone who asks that HIV-positive children should avoid sweets and eat fruit and vegetables to stay healthy. In his support group he was asked what HIV-positive children need. He answered: "Apples, bananas, multivitamins, Panado and love."

Stella arrives to walk him home. She admits to spoiling him. Boy knows she loves him more

than his two older sisters, Nina, 15, and Lebohang, 21, because Stella told him so. The sisters too confess to treating him with special care and attention.

Like most parents of HIV-positive children, Stella has forbidden Boy to tell anyone outside the immediate family about his status. Yet Stella has joined protest marches organised by the Treatment Action Campaign, proudly wearing a "HIV positive" t-shirt.

She isn't worried about what neighbours think of her but about how they will treat her child.

"I want to protect my son. People see me wearing the t-shirt and going to pickets. I know people from outside, they have their own conclusions and know I'm positive. I can't go tell them my son is positive. If they can know from outside that Boy is positive, they will act as they did to Siyabonga. It's really really painful."

Siyabonga is a child who lives in the neighbourhood. He was instructed by his mother not to tell anyone that he is HIV-positive, but one day he told some of his friends. Boy witnessed how they stopped playing with him. Siyabonga went home crying and told his mother how his friends had rejected him. She beat him for revealing the secret.

Stella and Boy share a small, rented two-roomed house with Lebohang. The toilet and tap are outside in the yard. Lebohang sleeps on a bed in the kitchen/living room. Nina sleeps nearby at the grandmother's house but eats most of her meals with her mother, half-sister and half-brother. All three have different fathers.

Occasionally Boy's father shows up at school and gives his son some money. He left when Stella told him she and their son are HIV-positive, denying that "this thing" exists. Recently he came to the school gate and gave Boy two rands.

"Two rands!" Stella fumes, holding up two fingers.

Money is a constant worry. Money and illness. No one in the family has a job. Lebohang says money is a source of strife in the home. She accuses her mother of stinginess, not even relinquishing R20 for a day out.

"I'd like my children to go out and have fun. But there's no money," Stella says.

Boy's future is another concern. "Will the child live long? If he did live long, he could do something for the community. Will I live long enough to raise my child?" The questions pour out of Stella.

The atmosphere of worry has not left Boy untouched. Every morning, when he wakes up, he sits up in the bed he shares with his mother and says, "Thank God, I'm awake".

- Names have been changed and locations not revealed to protect the identities of the people interviewed

Published on the web by Sunday Independent on June 4, 2006.

© Sunday Independent 2006. All rights reserved.