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The trauma and narratives of adult burn survivors:  
A South African perspective

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Abstract
This research documents adult South African burn survivors’ experiences of their lives and how their burns have affected them. The research question of the study was “How does a burn injury shape the life narratives of adult South African burn survivors?” In order to answer this, seven participants living in the Western Cape province of South Africa with a variety of demographics were interviewed utilising semi-structured interviews. A qualitative narrative analysis took place of these interviews- making use of the theoretical framework that the self, and experience, is created and understood through narrative. The results were then compared with the existing literature around trauma and narrative and similarities and differences were analysed. The predominant findings were that burn survivors had to deal with multiple traumas relating to their burn, the physical and psychological recovery from the injury, as well as their scarring and disfigurement. It was found that the experience and understanding of the trauma was created and maintained on a social level through norms and values, interpersonally through interactions with other people, as well as through the personal meaning that was made by the individual survivor. In all of the cases, the trauma represented a major disruption in the life narratives of the survivors. However with three of the participants, they said that other social issues in their lives (such as poverty) were more salient disruptions in their lives, and that their burn exacerbated their other difficulties. While all of the survivors talked about how difficult dealing with their burning and scarring has been, five of the seven participants defended against this difficulty by seeing their traumas as points in their lives where they felt like they improved as human beings. Four of the participants said that if they could have their lives over that they would choose to be burnt again, due to the sense of being improved or moulded constructively by their traumas.

Key Words
Burns; trauma; narrative analysis; narrative; South Africa
# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>TITLE PAGE</td>
<td>1</td>
</tr>
<tr>
<td>ABSTRACT</td>
<td>2</td>
</tr>
<tr>
<td>CHAPTER I: INTRODUCTION</td>
<td>5</td>
</tr>
<tr>
<td>CHAPTER II: LITERATURE REVIEW</td>
<td>8</td>
</tr>
<tr>
<td>2.1 The Epidemiology of Burns in South Africa</td>
<td>8</td>
</tr>
<tr>
<td>2.2 The Effects and Treatment of Burns</td>
<td>10</td>
</tr>
<tr>
<td>2.3 The Narrative Self</td>
<td>11</td>
</tr>
<tr>
<td>2.4 Trauma and Narrative</td>
<td>13</td>
</tr>
<tr>
<td>CHAPTER III: METHODOLOGY</td>
<td>19</td>
</tr>
<tr>
<td>3.1 Qualitative Research Design</td>
<td>19</td>
</tr>
<tr>
<td>3.2 Sample</td>
<td>19</td>
</tr>
<tr>
<td>3.2.1 Sampling Criteria</td>
<td>20</td>
</tr>
<tr>
<td>3.2.2 The Participants</td>
<td>20</td>
</tr>
<tr>
<td>3.3 Procedure</td>
<td>21</td>
</tr>
<tr>
<td>3.3.1 Informed Consent</td>
<td>22</td>
</tr>
<tr>
<td>3.3.2 Interview Schedule</td>
<td>22</td>
</tr>
<tr>
<td>3.3.3 Pilot Study</td>
<td>23</td>
</tr>
<tr>
<td>3.3.4 Gratitude</td>
<td>23</td>
</tr>
<tr>
<td>3.4 Ethical Considerations</td>
<td>24</td>
</tr>
<tr>
<td>3.5 Data Analysis</td>
<td>24</td>
</tr>
<tr>
<td>CHAPTER IV: RESULTS</td>
<td>29</td>
</tr>
<tr>
<td>Case I: Samantha</td>
<td>29</td>
</tr>
<tr>
<td>Case II: Cynthia</td>
<td>37</td>
</tr>
<tr>
<td>Case III: Larry</td>
<td>44</td>
</tr>
<tr>
<td>Case IV: Shirley</td>
<td>50</td>
</tr>
<tr>
<td>Case V: Thomas</td>
<td>56</td>
</tr>
<tr>
<td>Case VI: Celiwe</td>
<td>60</td>
</tr>
<tr>
<td>Case VII: Sipho</td>
<td>65</td>
</tr>
<tr>
<td>CHAPTER V: DISCUSSION</td>
<td>70</td>
</tr>
<tr>
<td>5.1 Psychological Effects</td>
<td>70</td>
</tr>
<tr>
<td>5.2 Trauma and Narrative</td>
<td>71</td>
</tr>
</tbody>
</table>
CHAPTER VI: CONCLUSIONS 77

6.1 Concluding remarks 77
6.2 Strengths and Limitations 78
6.3 Future Directions 79

REFERENCES 80

Appendix I: Informed Consent Form 86
Appendix II: Interview Schedule 87
Chapter I
Introduction

Burn injuries represent the third most common cause of accidental death in South Africa (Butchart, 2000). All over South Africa people are burnt in various ways, from being scalded by hot water to burning in fires in informal settlements. These people then need specialised medical care in order to treat the injury, which is often painful and traumatising. After the medical recovery they are left with the scars from the burn, and often have to deal with a change in appearance and identity (Sheridan et al., 2000).

Van Loey and Van Son (2003) explain that burn care and the research on burns has historically focussed on the medical and physical implication of being burnt. Martyn (1990) states that the psychological implications of burns only became an area of interest to practitioners and researchers in the last few decades, as the deeper understanding of the physiological effects and more advanced treatments became available. As a result of these advances mortality rates decreased and since more people were surviving the injuries, it became apparent that there are serious psychological consequences to burn injury.

Some of the research that has been conducted on the psychological consequences and understanding of burns has focussed on children and the effects that being burnt has on their development and their families (Holaday & McPhearson, 1997; Holaday & Wolfson, 1997). Other studies have focussed on quantitatively developing coping scales or other objective means to measure the coping strategies of burnt individuals (Willebrande et al., 1999). Epidemiological studies have also been conducted in a number of low to middle income countries in Africa (Ghana, Morocco, Ethiopia, Nigeria) and elsewhere in the world (Brazil, Bangladesh, Greece, India) (Blakeney et al., 1996; Boukind et al., 1995; Forjouth et al., 1995; Maghsoudi et al., 2005; Petridou et al., 1998; Rossi et al., 1998; and Werneck et al., 1997). Some qualitative studies have been conducted in the area of burns. However most of these focus on the relation between clinical symptoms such as Post-Traumatic Stress Disorder, anxiety and depression (El hamaoui et al., 2002). A few individual autobiographical accounts have been published such as Partridge's (1997) personal account of his experience of being burnt. It is important to note that most
studies have taken place in the United States of America, Europe and other parts of Africa, with little research having being conducted on South African samples. There has been no study to date that does a qualitative analysis of the psychological effects of burns on South African adults.

At a seminar on the psychological effects of burns held at the University of Cape Town in December 2005, various professionals (e.g. medical practitioners from surrounding burn units and psychologists with experience with burn survivors) and organisations working in the area of burns (e.g. World Burn Foundation) came together to discuss their respective knowledges and debate certain issues that they face in understanding and dealing with burn survivors in the South African context. During a discussion at the seminar, the question that came up repeatedly was ‘what actually happens to burn survivors when they are discharged from hospital?’ Many professionals stated that they were frustrated at not knowing what happened to the survivors that they treated after they were discharged, as there was minimal funding allocated to do any form of follow-up intervention or information gathering, particularly concerning the psychological consequences of burn injuries. One of the paediatricians of the Red Cross Children’s War Memorial Hospital burns unit stated, in a personal communication with the researcher, that many survivors commit suicide as a result of their burns (Rode, December 5, 2006).

The aim of this research was to answer the question “How does a burn injury shape the life narratives of adult South African burn survivors?” The idea that a person’s sense of self is constructed through language and through the stories and narratives that that person tells and believes about him/herself and the world, has been gaining in popularity in psychology over the past two decades (Crossley, 2000). There is a growing body of research that focuses on understanding how trauma affects the narratives that people have about themselves and their lives (Kaminer, 2006). For example, it is stipulated that trauma is seen to disrupt a person’s life narrative and that this is one of the primary effects that trauma has on a person (Wigren, 1994). It is hoped that by conducting a qualitative narrative analysis of the trauma narratives of South African adult burn survivors, a unique research contribution was made. This will also hopefully further the understanding of the psychological and psychosocial effects of
burns in the South African context, and begin to answer some of the questions about what happens to a person psychologically when they are burnt.

In order to do this, this study made use of a narrative theory framework to understand its participants, and adopted a variation of narrative analysis as stipulated by Labov (1973 in Cortazzi, 1993). Once the data was analysed the results were compared with the literature around trauma and narrative, in order to see where there were similar or conflicting findings. This was then discussed and conclusions were drawn as to what the most common themes were that came out of the narratives, and how this related to the existing literature and the research question.
Chapter II

Literature Review

Overview of the Chapter
In order to answer the research question, the data and understanding of the research subjects was seen through a specific theoretical lens. The concept of the self being constructed through narrative is one that has gained popularity in psychology over the last two decades (Crossley, 2000). In this paper, using the existing research around how trauma affects narrative will be central in understanding the burn survivor’s experience. This will be the theoretical underpinnings of this research.

This chapter will begin with a literature review of the epidemiology of burns and the effects and treatment of burns. It will then give an overview of the research and theory surrounding the self being constructed through narratives, and discuss the relationship between trauma and narrative.

2.1 The Epidemiology of Burns in South Africa
The National Injury Mortality Surveillance Profile states that based on statistics gathered in 1999, burns are the second most common cause of accidental death in South Africa, representing seven percent. Only transport collisions represent a greater amount, representing seventy-seven percent (Butchart, 2000). The exact statistics of how many severe burns take place in South Africa have been estimated at around 400 000 a year, with some of these being fatal and others being of varying severity (Rode, 1999). It has been estimated by Van Niekerk, Rode, & Laflamme (2004) that the burn rate in South Africa is approximately four times higher than in ‘First World’ industrialised countries. It is also assumed that the rate of burns in South Africa is very similar to other countries with similar populations with low socio-economic status and a marked variation of distribution of wealth and resources (Van Niekerk et al, 2004).

Most burnings in South Africa occur in townships and rural areas, where dense living conditions and poor resources substantially increase the risk of burn injury. It is mostly children that are affected by burns, as much of their behaviour needs to be supervised.
by adults or elders caring for them (Peden, 1996). Most burn injuries take place in the domestic setting of the home. A study by Rossi, Braga, Barruffini, & Carvalho (1998), conducted on a sample in Ribeirao Preto in Brazil, found that eighty two percent of burn injuries took place inside, or in the near vicinity of the child’s home, with at least one parent being present in eighty percent of the accidents. This was further substantiated by a study done in Ghana, where ninety-two of the research sample had been burnt in their home (Forjouth et al., 1995).

Factors associated with the susceptibility of the occurrence in burns in children are pans or pot handles left projecting out from the stove, heated liquids not being adequately monitored, and children left unsupervised (Rossi et al., 1998). In South Africa, the use of wood and coal fires, candles and paraffin, as a result of not having access to electricity, also substantially increases the risk of burn injury. A family that lives in and shares one room as their only abode is also seen as a risk factor by Van Niekerk et al. (2004), where often the children are present in the cooking areas where the cooking implements are unstable and are placed on uneven surfaces. It was also noted that infants and toddlers are at a higher risk than older children. Other factors that are associated with increased risk in South Africa are lower literacy rates, income levels, and overall health status’ (Van Niekerk et al., 2004). Another study done in Rio de Janeiro in Brazil by Werneck & Reichenheim (1997) similarly found that socio-economic status, low educational level and overall health status was a risk factor. More specifically it was found that the history of a sibling being burnt or dying from a burn, male gender, psycho-social stressors in the family, multiparity, adaptive problems, birth order, hyperactivity, psychiatric disorders, physical impairment and chronic disease were also potential risk factors.

In the Western Cape Province of South Africa, The Burns Unit at the Red Cross Children’s Hospital alone treats an estimated 2000 children per year, 94% of which come from lower socio-economic areas. Most people that are burnt are below the age of 6 (CAPSA, 1996). Many more children and adults get burnt every year in South Africa, some of them are not able to get to the Red Cross or Tygerburg specialist burns
units and either get treated in other hospitals or get very little treatment at all (Rode, 1999).

2.2 The effects and treatment of burns
Burns are excruciatingly painful injuries to endure and often result in long-term physical and psychosocial morbidity (Blakeney, & Meyer, 1996; Cooper, & Thomas, 1988; Patterson et al., 1993). Physically, it is not only the incident itself that is painful; the treatments afterwards can also be physically traumatic for months after the accident. Some of these involve the sloughing off of dead skin on the burn and exercises that involve stretching the burn such that contractures do not form (Bush & Harkins, 1991). In addition to this, the burn survivor usually has to endure several operations involving procedures such as the grafting of skin from an unburnt donor site to an area that has been burnt (Rode, 1999). Burns are also injuries that often take a very long time to heal, sometimes up to 25 years including rehabilitation treatments (Stoddard, 2002).

Despite all the medical advances in burn care and reconstructive surgeries available, there is no burn that heals without leaving a scar (Rode, 1999). Burn survivors who have had large sections of their body and face burnt often have to endure a change in identity, a loss of physical ability as well as a plethora of social stigmatisations (Sheridan et al., 2000). Research suggests that the burning of a child, or an adult, also affects the friends and family of the survivor to a large extent. Often their functioning as a family unit and their concept of future possibilities is drastically changed as a result of the injury (Miller et al., 1988). In addition to this, often the survivor's social and occupational functioning are diminished after the burn (Tarnowski, 1994). Previous research conducted with the parents of children who had been recently burnt as well as with the staff members that work in the Red Cross Children's Hospital burns unit revealed that there is great cultural stigma, superstition and shame that goes with being burnt. Some of the parents and staff explained that there are beliefs surrounding divine intervention and the marking of evil or punishment through burns. In one interview, a mother of a burn survivor explained that in her community when a child is burnt, it is understood as the ancestors marking the child on the outside as evil so that the other members of the community will recognise it as being evil internally (Tilley, 2004). In
another study done in South Africa by Yako (2006), it was found that the caregivers of the burn survivor are also affected psychologically by their child being burnt, and that they carry strong feelings of shame and guilt. This affects the dynamics within the family and the relationship that they have with their child.

Thus, the burn survivor has to not only contend with the actual trauma of the burning, but also with several other traumas resulting from it. Firstly, the physical rehabilitation and care process; secondly, the change in relationships with family and friends after the burn; and lastly, the change in appearance and implications of being disfigured by the burn.

2.3 The Narrative Self
People use narratives to understand themselves and their environments, and are storytellers by nature (Babad et al., 1983). These stories are not only a way to communicate with others, but provide coherence and continuity to one’s own experience (Lieblich, Tuval-Mashiach, & Zilber, 1998). More traditional definitions of narrative have been described as a ‘discourse, or an example of it, designed to represent a connected succession of happenings;’ as seen in Webster’s Dictionary (1966, p. 1503). A more recent definition by Josselson (1995) states that:

‘Narrative is the representation of process, of a self in conversation with itself and with its world over time. Narratives are not records of facts, of how things actually were, but of a meaning-making system that makes sense out of the chaotic mass of perceptions and experiences of a life’ (p. 33 in Josselson & Lieblich, 1995).

Narrative theorists have acknowledged this and through a school of thought referred to as social constructionism, have begun to understand the human being’s internal and external reality to be constructed, maintained and changed through the existence and process of narrative (Gergen & Gergen, 1988; Sarbin, 1986).

Social constructionist thinking is post-structural in nature and therefore rejects the notion of an objective observable reality, and rather understands reality as being subjective and free of absolute truths (Gergen, 1991; Harre, 1992). Pluralism and
relativism are advocated in this understanding of the self and social reality (Burkitt, 1991; Semin & Gergen, 1990). Social constructionism critiques structural understandings of reality as being prescriptive and inducing unacknowledged power differentials through defining dichotomies and norms (Foucault, 1980). None the less, the social constructionist position embraces these structural ideals as being part of the discursive fabric of societies and communities, and acknowledges that these dominant discourses often govern social understanding and functioning, and through this become the ‘reality’ of those people and that society (Rose, 1996).

In post-structuralist theory, it is assumed that the human being is more than just the sum of his/her parts (demographics) (Hollway, 1989). It posits that through social interaction and the interaction of the self with the other, that the self is constructed (Coulter, 1979). Where structural theory suggests that experience and pathology is located within the individual, social constructionist and post-structuralist thinking states that it is located between people and in societies’ norms and values (Berger & Luckmann, 1966; Gergen & Davis, 1985; Westen, 1985). It explains this by placing an emphasis on the importance of language and how this creates thinking and therefore reality (Harre & Gillet, 1994). Shotter (1993) further elaborated on this, saying that we think in words and therefore in language. When one interacts with another this language is then reconstructed and changed through the interaction, thus changing the thoughts of the people speaking, listening, and thinking those words. It is also stated by Shotter (1993) that not only do these ‘conversations’ or exchanges of words happen between people, but they also happen within them, in the form of thinking. People think in words, and it is through this process that the self is created. However, although these two processes are different, they are not mutually exclusive. They interact and affect each other constantly. In other words, the interactions that people have with others change their thoughts and therefore their reality. Consequently, words and language, which are always in the process of being reconstructed and changed internally as well as externally, inform and become the reality of the person (Sampson, 1993).

In narrative theory, the stories and narratives that a person tell are not merely a representation of reality; they are the reality of the person (Gergen & Gergen, 1988;
Ochs & Capps, 1996). A person’s life often consists of multiple narratives surrounding the various aspects of that person’s external interactions and internal language. These narratives are then seen to exist temporally in terms of past, present and future. The sense of self of the person thus represents the culmination of all of these narratives, with each narrative acting as both a reflection of the event itself, as well as the social interactions and retelling of that event (Elster, 1985).

2.4 Trauma and Narrative
Wigren (1994) states that ‘the construction of a narrative is a psychological achievement’ (p. 415). Firstly, it requires that the person pay attention to an experience or situation. Secondly, there are cognitive-perceptual selection processes whereby certain elements of the internal and external environment are assessed as being relevant to the experience or situation. After this process, causal chains are constructed, that locate parts of the experience as causes and as consequences of other experiences. The experience is then connected to characters in ways that both evoke and account for emotions. Experience is also episodically understood and organised, and thus is seen to be linked to some experiences and not to others. Conclusions are then drawn from these experiences, influencing future behaviour and making a contribution to the person’s sense of self or personal identity.

A complete narrative is therefore one that divides experience episodically, connects these experiences in terms of cause and effect, creates and makes sense of emotions, and considers the consequences of the experience for characters. ‘Completed narratives “make sense” of felt experiences’ (Wigren, 1994, p. 416). In essence, Schank (1990), has stipulated that functionally, narratives allow people to use past experiences in the understanding of the present, as well as in the prediction of future events and experience. Demattos (1994) elaborates on this, saying that narratives are essential for social exchange to take place in which the self relates to the other, is validated by the other, and is constructed by the other through their sharing of narratives. Furthermore, the construction and exchange of narrative is the way that connections between thoughts and feelings are made (Wigren, 1994).
Early theorists examining trauma believed that memories encoded during trauma are essentially different from ordinary memories (Pierre Janet, as cited in van der Kolk & van der Hart, 1991). Memories encoded during times when the person is not experiencing trauma, are seen to form narratives, while those that are experienced during traumatic circumstances, are not.

Common non-traumatic memories are seen to include emotions and affect, but in a form that is controllable and that fluctuates within ordinary limits. When the non-traumatic memories are recalled, they do not produce excessive or overwhelming emotional responses. A non-traumatic memory may be called into consciousness at will in most situations. Even when the person is unexpectedly reminded of the memory either through a trigger or association, the person is still able to maintain control over his/her emotions and even by choice shift his/her mind to another matter. ‘Human beings contain affect by building narratives. When memory is narrative in form, affect is linked to, and therefore contained in, an episode that is specific to time, place, character and meaning’ (Wigren, 1994, p.416).

Traumatic memories on the other hand hold a very high emotional valency. They are usually vivid and are remembered as being uncondensed, and are often not seen to be part of the primary memory system. Often traumatic memories cannot be recalled at will and are unexpectedly brought into mind by triggers in the environment representing an element of the trauma. This involuntary recollection of the memory is then often experienced with increased emotional response, with in some cases strong recollections in the form of imagery, or somatic sensations (van der Kolk et al., 1996; Wigren, 1994). Research shows that events of high personal significance are recalled in unusual detail, and that they tend to remain stable over time (Yuille & Cutshall 1986).

As mentioned above, narratives are principally social creations. Narratives are created in relation to conversation with an ‘other’. This ‘other’ is sometimes the self as with an internal dialogue, but is mostly an external dialogue that takes place in conversation with other people. Jordan (1987) states that the availability of the ‘other’ is paramount to the creation of a narrative when the experience is traumatic, or unusual. However,
research suggests that part of the consequence of trauma is that the survivor may become socially less connected to others after the incident, making narrative creation even more difficult (Herman, 1992). This may happen in a variety of different ways: The survivor may be actively silenced as in the case of War Veterans, where their work and traumas are considered to be confidential. The narrative of a trauma is often difficult and painful to hear for both the survivor as well as the audience. Consequently, the survivor may avoid situations where he/she may have the opportunity to say what happened. Similarly, the audience may wish to avoid the survivor in order not to experience the telling of the story of the trauma. Lastly, survivors of trauma may feel alienated from others by virtue of them feeling different from others in the way that they are pre-occupied with the trauma, whereas the people around him/her are pre-occupied with everyday issues unrelated to it (Herman, 1992).

In addition to this, Janoff-Bulman (1985), suggests that trauma damages the assumptions that a person has about the world being a safe place (for example 'If I am careful, bad things won't happen to me'), as well as the assumption that the self is good and deserving (for example 'bad things won't happen to me because I am a good person'). Often trauma survivors struggle to answer the question as to why the incident happened and also why it happened to them specifically (Tuval-Mashiach et al., 2004). This is assumed as being the result of their assumptions of the world being changed through the trauma. Therefore it is difficult to give a meaningful causal explanation of the trauma itself. Foa & Rothbaum (1998) state that trauma survivors may come to believe that as people they are vulnerable, powerless, bad, unworthy, and totally incompetent. They also may begin to believe that the world is dangerous, unpredictable and out of their control.

There is also research to suggest that trauma interferes with the psycho-physiological connections that allow for narrative creation and memory to take place. In short, with ordinary memories, the brain’s limbic system, which is concerned with affect and emotions, and the cerebral cortex, which is concerned with cognition, act contrapuntally in modulation with each other. However, with traumatic memories, the limbic system is over-stimulated. Consequently, the memories encoded at this point are emotionally
intense and cognitively under-organised (van der Kolk, 1988; van der Kolk & Sapporta, 1991).

Piaget (1936) stated that cognitively, understanding an experience depends on two processes, viz., assimilation and accommodation. Assimilation is where new information is understood in relation to already existing understandings. Accommodation takes place when a new experience is not threatening and can be accommodated as a new cognitive category that bears some resemblance to other categories already in existence. However, Kelly (1963) explains that because trauma by definition is outside the realm of normal human experience, it cannot be assimilated or accommodated into existing understandings of the world, and that often in order to deal with the trauma, the person's existing understandings about the world need to be changed. McCann et al., (1988), states that even though some traumas may be quite common or be repetitive in the life of the survivor, they remain psychologically alien in the way that they are, on a psychological level, unexpectable and unexpected. Even if the person knows that the trauma is going to happen, the person will still be traumatised by the experience.

Apart from the actual memory of the trauma, there is also the meaning that becomes ascribed to it in the form of narrative. Most narrative theorists explain that narrative does not exist free of many other influential factors (Miller, 1984). Mscolo, Craig-Bray, & Neimeyer (1997), refer to narrative constructions of meaning as existing in multiple hierarchically organised and interactional levels. At the highest level, they talk about a narrative as existing in a 'societal meaning system', where the narrative constructions of the society in the form of discourse and ideologies influence the construction of all narratives. Secondly, they refer to the 'meaning construction systems of interpersonal interactions'. This refers to the narratives that are created, changed and affirmed by direct interactions with other people in the person's life. Lastly, they refer to an 'individual meaning making' process, where the person through having an internal conversation with him/herself creates meaning in terms of their own pre-existing narratives.
Other narrative theorists state the importance of the person’s narratives of the past and the narrative expectation of the future in understanding the present. Consequently, when a person experiences a trauma, he/she then inevitably understands it in terms of what preceded it, what is happening in their life at present and with the expectation of what is going to happen (Crossley, 2003).

Wigren (1994) states that one of the most devastating effects of trauma is that it disrupts the person’s life narrative. It changes their expectations of the world, and of themselves as well as interfering with their concept of future. Research done on the parent’s of burn survivors in South Africa showed that their own concept of future as well as their concept of future for their child was substantially changed as a result of the burning (Tilley, 2004; Yako, 2006).

A literature review by Kaminer (2006) showed that some trauma survivors find value in their trauma experience, and use the trauma as an opportunity to evaluate their lives in a more positive way (Fosha, 2001; Niemeyer, 2004; Norman, 2000, in Kaminer, 2006). White & Epston (1990), also state that trauma narratives may not always be told with stories of being the ‘victim’, but may also be stories of resilience and survival where the survivors’ positive attributes are expressed. Linley (2003) has shown that a positive transformation after a trauma may not simply facilitate a return to the original way of functioning before the trauma, but may facilitate the survivor achieving a higher level of functioning and fulfilment in their lives. In trying to understand how this takes place, Janoff-Bullman & McPherson Franz (1997) have suggested that trauma throws into contrast previously unrecognised and under-appreciated aspects of the survivor’s life (such as significant relationships), allowing these to be ‘seen’ and acknowledged for the first time. Consequently, a traumatic event can be understood as a crossroads or turning point in the survivor’s narrative of their life, in which previous priorities and values are reconsidered, such that a change in life narrative towards leading a more significant and purposeful life is possible (Harvey et al., 2000; Janoff-bulman & McPherson Franz, 1997; Tedeschi & Calhoun, 1995). Lantz & Lantz (2001), state that a trauma may be ‘honoured’ as an opportunity for positive changes in the person’s life and for emotional and personal growth. Tedeschi & Calhoun (1995), describe various
studies in which trauma survivors have documented positive changes in the person’s sense of self, the deepening and improvement of their relationships with others, and a changed philosophy of life. Changes in the person’s sense of himself or herself may include realising the extent of their personal strength as well as an acknowledgement and acceptance of their vulnerabilities. Changes in relationships may include more emotional expressiveness interpersonally and self-disclosure, which deepens intimacy in relationships, increases empathy towards others and increases more altruistic behaviour, giving the person a greater sense of value and purpose. Lastly, changes in the person’s philosophy of life may include greater appreciation towards oneself as well as towards others, a re-ordering of priorities, and the development of spiritual beliefs (Kaminer, 2006).

In conclusion, there are a number of factors that contribute to the high incidence of burns in South Africa. According to narrative psychological theory, the psychological effects of these burns can be understood in the theoretical framework of the self being constructed and maintained through narratives. With this in mind, there is also the theory around how trauma affects these narratives, and this needs to be taken into account in order to understand how the burn and the resultant traumas have affected the life narratives of the burn survivors of this study.
Chapter III
Methodology

3.1 Qualitative Research Design
This study was conducted using a qualitative research design. It focused on the subjective meaning that the participants gave of their experiences. It was conducted within the interpretivist/phenomenological paradigm of research. The narratives arising out of the research were understood and analysed utilising the theory and method stipulated by Labov (1973. in Cortazzi, 1993).

3.2 Sample
The research made use of a combination of resource sampling and snowball sampling. The resource that was made use of was the database of burns survivors of the South African branch of the World Burn Foundation. The database had been updated last in January 2006. The database represented all of the burn survivors that the World Burn Foundation had made contact with through their various forms of intervention and information gathering. The members consented to having their names on the database and were made aware that they may be contacted for psychological interventions or research purposes. The World Burn Foundation maintains strong connections with the various burns units throughout South Africa and also runs a series of meetings where burn survivors have the opportunity to meet and talk with other survivors. They also run ‘burn camps’ twice a year, where burn survivors of all ages throughout the country come together for a weekend and participate in various activities to try and help them form connections with other burn survivors and deal with their trauma (Eksteen, personal communication, December 5, 2006). The Head of the Cape Town branch of the World Burn Foundation gave the database to the researcher, and consented to it being used for the research purposes of this study.

From the participants made available through the database, the interviewees were then asked if they knew of any other burn survivors, and these survivors were then contacted based on their demographic information and consent to participate in the study.
3.2.1 Sampling Criteria

In order to be considered for the research, the participants needed to be presently living in the Western Cape Province of South Africa, although they could have spent other times of their lives living elsewhere in the country. This was to facilitate convenience in the research, taking into account the limited resources available for the researcher to travel throughout the country in order to do the interviews.

As a result of this study being on adults in South Africa, the participants needed to be above the age of 21.

To try and get a representation of a South African sample, the researcher attempted to get a variety of different ages, genders, and races in the participants. This was done whilst bearing in mind the limits of the sample in terms of sample size, and availability of participants. Only consenting participants were interviewed for the study.

3.2.2 The Participants

The study was conducted on 7 adults from age 23-65. Four of the participants were women, and three were men. Four of them were coloured, two black and one white. Three of the coloured participants and the one white participant were sourced from the World Burn Foundation database. One of the coloured participants and the two black participants were sourced via snowball sampling. None of the black participants living in the Western Cape that were on the World Burn Foundation database consented to be part of the study. Two of these declined an explanation for non-participation, and the other two said that it was not convenient for them. The participants lived in a variety of different suburbs in the Western Cape (see table 3.2.2.1).
### Table 3.2.2.1

<table>
<thead>
<tr>
<th>Name</th>
<th>Samantha</th>
<th>Cynthia</th>
<th>Larry</th>
<th>Thomas</th>
<th>Shirley</th>
<th>Celiwe</th>
<th>Sipho</th>
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</tr>
<tr>
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<td>Coloured</td>
<td>Coloured</td>
<td>White</td>
<td>Coloured</td>
<td>Black</td>
<td>Black</td>
</tr>
<tr>
<td>Place of residence</td>
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<td>Ocean</td>
<td>Ocean</td>
<td>Strand</td>
<td>Mitchell's</td>
<td>Nyanga</td>
<td>Somerset</td>
</tr>
</tbody>
</table>

#### 3.3 Procedure

Once the participants were contacted and gave consent to participate in the study, they were asked whether they would prefer to be interviewed at home or come to the Child Guidance Clinic (a building that facilitates the training of Clinical Psychologists on the University of Cape Town’s campus). Six of the seven interviewees stated that they would prefer to be interviewed at home, but two of these six stated that there was not a private room available in their house. Consequently, these two participants were interviewed at the Child Guidance Clinic. One of the interviewees stated that she would prefer to be interviewed at the Child Guidance Clinic.

The participants were then informed further about the study and given a consent form to be signed (see 3.3.1). After this, a semi-structured interview was conducted (see 3.3.2). On conclusion of the interview the participants were given the telephone number of the trauma centre in Woodstock Cape Town, should they feel like they need to talk about their trauma and life difficulties more, in a containing environment with a trained professional. In addition to this, they were given a financial gratuity as an acknowledgement for sharing their experience for the sake of the study.

The interviews were all recorded and transcribed verbatim after the interview, and this, along with the non-verbal communication noted by the interviewer, was the raw data for the research.

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1 Pseudonyms are used at all times
3.3.1 Informed Consent

Before the interviews were conducted, it was explained to the participants that there is a great need for research on the psychological effects of burns, and that this study was going to focus on that. The participants were also informed that the study was going to take place in the form of a Master’s dissertation in Clinical Psychology.

The participants were told that even though the interviews were being recorded with the view to transcribe them later, everything that they said in the interview would be strictly confidential. This was explained in terms of their names not being linked to the study in any way and with pseudonyms being used at all times. They were also told that the recording and transcripts of the interviews would only be available to the interviewer/researcher and supervisor. Lastly, they were told that they could stop the interview at any point should they wish to, with no negative repercussions. After this was explained verbally, they were given it in writing in the informed consent form (see Appendix I), and then asked to sign the form indicating that they were adequately informed about the study and voluntarily participated in it.

3.3.2 Interview Schedule

Whilst doing qualitative research, the interviewer and the interview situation always influence the interviewee. Consequently, the material generated in the interview is not just created through the interviewee’s previous experience, but through their experience of the interview as well (Willig, 2001). Hollway & Jefferson (1997) state that in order to minimise these effects, two main factors need to be present in the interview situation. Firstly, the questions in the interview schedule need to be open-ended in order to leave the interviewee with as much opportunity to answer in an unprescribed way as possible, whilst still keeping the focus of the research material. Secondly, the interviewer should at all times, where possible, try to use the language that the interviewee uses, as well as to generate conversation that arises out of the material elicited, should this seem appropriate to the research. With this in mind, the interview schedule contained a balance of exploratory questions such as ‘I was wondering if we could begin with you telling me a little about yourself, anything that comes to mind?’ and more specific explanatory questions such as ‘Can you perhaps tell me a little about the time when you
were burnt?’ (See appendix II). These questions were asked to elicit a rich substantial narrative that still follows the course of the research question. However, it is important to note that the interview schedule was used more as a guideline rather than a protocol. During the interview, often questions were asked like ‘please tell me a little more about that?’, or ‘when you said that, what did you mean?’ Therefore the researcher did not rigidly stick to the questions, but rather attempted to stay with the material that the interviewee was sharing, respecting the boundaries of privacy as well as not overtly imposing his agenda at the expense of the richness of the (inter)subjective narrative.

3.3.3 Pilot Study
A pilot study was conducted in order to test the suitability of the interview schedule and interview method.

3.3.4 Gratuity
On completion of the interviews, each interviewee received a gratuity of R150 for participating in the study. They were informed about this gratuity before the commencement of their interviews. Some issues of concern that could have been raised regarding the gratuity were that the participants may have felt obligated to share their stories in order to receive the gratuity. Alternatively, it could have been experienced as demeaning in that a monetary value was being placed on their life story. However, these potential difficulties did not seem to be a salient factor in the interviews. Six of the seven participants accepted this token of appreciation. Each participant responded to the gratuity in a different way. The four coloured participants all said that it was not necessary to pay them for the interview, but accepted the gratuity after the interviewer explained that this money had been set aside for them as part of the research costs. The two black participants said that it is not appropriate for them to accept the money as they felt as though they had benefited from participating in the interview, but accepted the money none the less. The one white participant, who was of a higher socio-economic background refused the gratuity and said that he felt ‘privileged’ to partake in the research.
3.4 Ethical Considerations
Some of the ethical considerations of this study involved the use of human subjects that had been traumatised. In interviewing them about this trauma, the interviewer ran the risk of potentially traumatising the participants further in the retelling of their experiences, as well as potentially exploiting the participants in using their life stories for research purposes. However, by thoroughly informing the participants about the study and presenting them with an informed consent form (see 3.3.1), as well as following with a procedure that was based on voluntary participation (see 3.3) this risk was kept to a minimum. In addition to this, the interviewer was an intern clinical psychologist, and whenever appropriate, tried to contain the participant’s emotions. The research ethics committee of the Faculty of Health Sciences and the Psychology Department at the University of Cape Town reviewed the proposal of the study and gave the necessary ethical approval.

3.5 Data Analysis
Once the interviews had been transcribed, the researcher read the transcriptions several times in order to immerse himself in the material, and become familiar with the language and style of speaking that the interviewees used.

Within the narrative approach, the interviewees are seen to be more knowledgeable than the interviewer. The task of the researcher is to suspend his/her theoretical understanding of the material during the interview as well as initially during the data analysis, such that the authentic and (inter)subjective narrative can be elicited (Daiute & Lightfoot, 2004). After this was done, the information was analysed in accordance with the suitable data analysis methodology.

Narrative Analysis
Narrative analysis is one of social constructionist theories’ suggested methods of research (Daiute & Lightfoot, 2004). Lieblich et al. (1998) have created a model for the classification and organisation of the types of narrative analysis. They organise the techniques into two main dimensions, viz., (a) holistic versus categorical, and (b) content versus form. Categorical analysis organises the original narrative or story into a predetermined defined category. With the holistic approach on the other hand, the life
story or narrative is taken as a whole, while sections of the narrative are interpreted in
the context of other parts of the narrative/story. In terms of content versus form, with
content analysis, the explicit content is analysed, viz. 'what happened, or why, who
participated in the event, and so on' (p.12). A content analysis may also look at the
implicit content by looking to the semantic and emotional valency of parts of the
narrative or what a certain image or story symbolises or means to the participant.
Alternatively, some narrative analysis does not take the content into account but rather
focuses on the form of the narrative, examining the sequencing of events according to a
time axis or the structure of the plot, its coherence or complexity, the style of the
narrative, the language used, or the emotions elicited.

Some narrative theorists refer to the person's 'grand narrative', i.e. the narrative that
represents the person's experience, identity and life (Elms, 1994). However, many other
theorists believe that the self is constructed through multiple narratives rather than
through one grand narrative (Daiute & Lightfoot, 2004; Watson, 1985,). In addition to
this, the literature on the psychological effects of burns states that it is not only the burn
incident itself that is traumatic, but that the treatment procedures, change in
appearance and change in relationship dynamics are also experienced as traumatic for
the burn survivor (Blakeney, & Meyer, 1996; Cooper, & Thomas, 1988; Patterson et al.,
1993). Consequently in this research, the various narratives that arose out of the
interview were examined in order to give a more in-depth understanding of the person's
experience. Once these multiple narratives were drawn out of the transcription (for
example, 'School' or 'Being Burnt'), the next stage of analysis took place.

In this research, a method was utilised that would generally be classified as a Holistic-
Content approach that also makes use of Categorical methods. The method was a
variation of the method suggested by Labov (in Cortazzi, 1993). He suggested that four
elements of analysis must take place, viz. –

1 - Context
2 - Narrative Plot
3 – Narrative Tone
4 – Core Narrative

With the context, the demographic information was given as well as a general overview of the person’s life. Some of these would include their name, age, sex, highest level of education, employment status as well as some details about who the person lives with and their family. Information with regard to how the participant responded to the interview situation was also analysed at this point. This was to contextualise the various narratives that arose out of the interview.

Narrative is assumed to be organised temporally, i.e. having a beginning, middle and end, with this most commonly being referred to as the narrative plot (Daiute & Lightfoot, 2004). On examining the narrative plot, of each narrative, an analysis of four dimensions took place, as suggested by Labov (1973, in Cortazzi, 1993). These were – orientation, complication, evaluation, and resolution/results.

With orientation, information regarding how the interviewee orientated the interviewer was examined in terms of giving details of time, place, and who the characters were in the narrative. After this, one or more complications arising in the narrative were then examined. Labov, (1973 in Cortazzi, 1993) stated that a complication is an action or problem that requires a response of some sort in the person’s experience. Thus a complication manifests as something significant in the person’s experience creating the need for some sort of change in thinking, behaviour or understanding of reality. This may be experienced as an element of the external environment such as the burning itself or what someone did or said to the burn survivor. Alternatively it may be an internal experience such as a change in opinion or way of thinking. These complications then play a large role in the evaluation and resolution of the narrative.

After the complications have been analysed, the evaluations of them were then examined. In doing this, the analysis gave an idea to the analyst why the narrative was told and how important it was to the burn survivor. In evaluating the narrative, the burn survivor shared their attitudes, beliefs, norms and values. This was done in
motivation to make the interviewer understand the narrative from their point of view rather than leave the factual information as ambiguous or left open to interpretation. Labov (1973 in Cortazzi, 1993) differentiated evaluation into external or overt evaluation and internal or covert evaluation. With external or overt evaluation, the interviewee may make obvious comments relating to their appraisal of the experience such as 'That was the worst moment of my life' or 'On reflection I did not know how influential that was at the time'. Internal or covert evaluations may be expressed in a thought or an action such as 'I was terrified' or 'I just went into my room and cried myself to sleep'. Labov also stated that the absence of an action can also be indicative of an evaluation, and suggested that anything that is 'marked' as being significant can be seen as indicating an evaluation of what is being expressed. This may come in the form of a long pause in the narrative or an unexpected change in topic.

Lastly, all of the changes in behaviour of the characters in the narrative as well as the difference in thinking of the interviewee, as a result of the complication and evaluation, were considered to be part of the resolutions/results. This may have included comments like 'After I went and spoke to them, they were much more friendly to me', or 'I don’t let it bother me anymore'.

All four of these dimensions were individually dependent on personal experience, societal and community norms and values, economic factors, other influential stressors in the person’s life, familial and political dynamics, as well as the interview situation in which the material was gathered.

The narrative tone was then extracted from the analysis of the narrative plot. This was a general evaluation of the affect associated with the narrative, as evaluated by the researcher, based on his analysis of the narrative. This was done by making use of how the narrative was given, and on the non-verbal communications in the interview.

Lastly, the core narrative was then analysed, which is an analysis and summation of the underlying meaning in the narratives, and how the experiences affected the person.
After the analysis took place, the results were then examined in the context of the existing literature around trauma and narrative. Similarities were alluded to and conflictual evidence was noted in the discussion.
Chapter IV

Results

Case 1 Samantha

Context
Samantha described herself in this way: ‘I am 44 years old, I am married, I have four children and two grandchildren, um. I am a Taurus, I am a housewife, and I do a little bit of sewing on the sideline. I am a happy person.’ She was an Afrikaans first language coloured woman living in a house with her husband and two of her children and her two grandchildren in the suburb of Lotus River, Cape Town. On the telephone, she said that she was happy to do the interview at her house and organised for her children to go out for the day of the interview. The interview took place in her sitting room. Her husband was present in the house, but was not in the room whilst the interview took place. She was visibly scarred on her face, and the rest of her body was covered up by clothing. She was slightly cautious of the interviewer but was forthcoming and spoke confidently during the interview.

Being Burnt
Samantha orientated her narrative about being burnt by saying that it happened when she was about 18 months old, in her house. The characters that she identified as part of this narrative were her parents, her two sisters and brother, as well as all the people that she had encountered since then, i.e. all the people in her life. She readily spoke about this in the interview, and did not get visibly emotional whilst speaking about the burning.

The chief complication in this narrative was the burning incident. She explained that she had just started to walk and she was playing with a hanger in the lounge. Her mother had put some milk on the Primus stove\(^2\) and she had to go to see to her brother in the bedroom as he had whooping cough. While her mother was attending to her brother Samantha went into the kitchen. The hanger caught the stove and pulled the stove over and onto her, and she caught alight. She said that ‘I didn’t make a sound, and the time that she came out of the room, I was sitting in the corner trying to get the

\(^2\) A stove that uses paraffin.
flames... killing the flames, you know, doing that and I think that is why at the beginning of the burn my eyes was also down like that... she pulls her eyelids down... and this was like from doing that, and there was nothing there, and there was no lip... There was no hair, my hair was burnt off, part of the ears there was a little burn and part of the neck was burned’. She then remembers being sent to the Red Cross Children’s Hospital and receiving treatments there, and then again at Groote Schuur Hospital when she was older. In terms of these treatments and her disfigurement, she said that ‘when you look at yourself, you say you are ugly, you are ugly, you are ugly... you don’t want to eat, you don’t want to be with your friends, you don’t want to talk, you just want to be alone’.

In terms of her evaluation of this narrative, Samantha was not able to remember the acute phase of when she was burnt, but in retrospect she stated that ‘It is all about other people. You know with being burnt, it is never about yourself. You don’t worry about yourself, you worry about other people. You worry what other people is, what they see’. In examining her narrative, she described many aspects of her life to be related to the burning, and that this had influenced her behaviour and understanding of the world. Consequently, the burn incident, as well as the resulting treatments and disfigurement, were evaluated by her to be critical aspects of her personal identity and interactions with others.

Looking towards the results/resolutions of the narrative, Samantha explained that her brothers and sisters made a large contribution to her finding resolution of the complication of her disfigurement and said ‘My sisters, my brother, they played a big role in my growing up years. They would never throw me to one side. Sometimes they would make a joke, or say something, but then they would just grab you again and say that “I am just playing” you know, things like that, and cry but then its over, it is over. They were there for me, they are still there, we are a very close family’. In resolution to some of her difficulties she suggested that ‘I just think that people need to be educated about burnt people, because we are also people, we are also human beings. And we also have feelings, you know’. While this is not something that she can do, it at least offers a potential for resolution to her difficulties. When asked about what she would say to someone who had just been burnt, she said she would not say anything to them
except that they must just get on with their life and not worry about what other people say. This perhaps indicated her resolution and sense that she had made in terms of her own life recovery from her burning. Another resolution that she made was stating that she was not as bad as other burn survivors, considering herself fortunate in comparison to what she believed ‘other’ burn survivors had to go through in their lives.

The narrative tone of Samantha being burnt was one of struggle, and strength in overcoming the difficulties that she has faced as a result. She spoke about her burning experience with very little emotion, but had a frown on her face throughout this section of the interview, possibly indicating some discomfort in talking about it.

School

One of the strongest narratives that came out of the interview with Samantha was her experience of school. She orientated the interviewer by referring to the time when she was in primary school and then later in high school, and referred to incidents that happened at the schools. The characters in this narrative were the children at school with her, the teachers and headmaster, and her family.

The main complication of this narrative arose from her having difficulties with the other children at the school. She explained that ‘it was really hard. Because, you have friends for a moment, and then after that, the friends then turn around and you get all these kinds of names and all these kinds of things coming to you. And you are alone; you do not know what to do’. Samantha also explained that she failed Grade 1 and 2 because ‘there wasn’t time for me to concentrate, I had to concentrate on the children in the class rather than what the teachers said’. Samantha recalled her difficulty in detail saying that ‘I used to fight every day. Not fight because I want to fight, it is because they make you so mad, and that is what they are saying to you all the time “Gebrande bek”, gebrande bek, gebrande bek”, and then they throw you with stones, and it was like I was an outcast. They throw you with stones and they hit you, they uh...that school had these big trees and the leaves and the branches were very down and they took them off and they hit me...she hits her thighs and her arms...and they say

3 Afrikaans for ‘burnt mouth’.
"gebranded bek" and they hit you. I used to come home with my legs standing up like that... she indicates about an inch with her two fingers... then you see it not just girls, it is girls and boys'.

In looking at Samantha's evaluation of this narrative, the fact that she devoted so much of her interview describing her time at school possibly indicates that this was a very significant experience. This was further suggested by her stating that in her 'adult life' she is a happy person, but that earlier in life things were very difficult for her.

The resolution/results of this narrative chiefly involved other characters in her life. She explained that when she was at school her mother would say to her 'sticks and stones will break your bones', using the cliché that words cannot harm you. She explained that her whole family were a support to her, but that in particular, her brother was very supportive. She said that 'the two of us were together, and he was protecting me and fighting with me... he would take me to the park and he would sit on the swings, and he would always tell me "don't worry sis... I love you, you know, we love you, and they are just nasty" and then walk home, and he would cry with me... if he see me crying then he start crying as well, and the two of us would just cry'. Another resolution of this complication took place when she went to high school. Samantha explained that in high school she met a few friends that stood up for her and that the priority of the other girls turned towards 'boys'. She explained that this also created a complication with her in that she thought that as a result of her scars, nobody would want to be in a romantic relationship with her. However, she stated that when she met her husband, her major complications at school were resolved. She said: 'it all comes down to having a boyfriend... you don't care anymore because you have got a boyfriend so why must you worry about what other people say and what other people think. You know, it was fine, he is taking me out, I do not need to go with you guys. You know, I don't need them, I was like that. When I had him, it was like I would push those things, push those things aside. Push everybody aside, with just focusing on this one'.

The tone of this narrative was one of trauma, aggression and isolation. She raised her voice on several occasions when she spoke about how the other children spoke to her
and treated her. She seemed visibly upset when she spoke about it, as was indicated by her shifting her posture in her chair and gesturing often when she spoke.

As a mother and wife
Samantha orientated this narrative by referring mainly to her relationship with her husband from the time that they met, as well as to her relationship with her children, particularly when her children were teenagers.

Complications in her relationship with her husband arose in her initial anxiety that nobody would find her attractive as a result of her scars. Her complications in motherhood stemmed from her children reacting to her scars as well as her not agreeing with their actions at times. In her narrative she stated that ‘There was a time in my life now that I think, that my children just started with their teenage years, you know, and then they look at their mother and say things like “you know mummy, you need to go on things like a diet or you need to dress like this”, or you know, you have got to go with the times with your children. And then there was a time when I thought you know, I need to take this thing off my face, I need to get rid of it now. Maybe my children doesn’t want to be with me, that is what I thought, um. That is why they are saying all of these things, you know. Uh, lose weight, dress funky, um, all of these things. And I think that it is maybe the mark that is worrying them but they don’t want to come out and tell me about it’. Samantha also referred to her one child getting pregnant when she was very young as a complication and stated that when she heard that she was pregnant, she kicked her out the house.

She evaluated her husband as being a crucial part of her life by saying that ‘I don’t think that I can do anything without this man, you know he is like, my life’. She stated this a number of times throughout the interview and at one point even referred to him as her ‘Psychologist’. With regard to her children she implied that she had acted in a way that would be considered as good mothering by making certain value statements about her children like ‘it is important in life to have an education and not to ruin your life by getting pregnant early’. She also suggested her evaluation of her role as a mother as being very significant as she mentioned many actions in her narrative that related to
This was further substantiated when she stated that because she has had to go through so much difficulty in her life as a result of her scars, her children must have more opportunities and do the things that she felt that she was never able to do.

The resolution of her anxiety about nobody accepting her because of her scars came in her long-term relationship and marriage to her husband. She even stated that her marriage was better than many other people that she knows. She recalled her meeting him in detail stating ‘I thought at first you know, uh, this guy, is he playing me you know? All these things go through your mind, you think, he can get with a...he was a fancy boy you know, he used to dress very beautifully, very sexy, and um. I remember when I came out of school and I came past the bus, and there he was sitting, and our eyes meet and we fell in love, and so at that time we went out, and we had our ups and downs but it wasn’t like big like. We never ever split, for the nine years that we went out, we never split, it was never like a gap. You know how boyfriend and girlfriend go out and then there are like “ah no, I don’t want anything to do with you”. Like you are away from her and she is away from you and you get back together. We didn’t have that. It was that, he was there all the time’. With her role as a mother in terms of her resolving her complications and evaluations, she mentioned many actions that she did in order to educate her children, and help them as much as possible. She mentioned how she talked about sex to her children all the time, and that when they wanted to go ‘clubbing’, she insisted that she go with them. Although she did kick her one daughter out if the house, she also talked about how she was, at the time of the interview, helping her daughter look after the baby as much as possible.

The tone of this narrative was largely optimistic in nature. Samantha spoke with great pride about her relationship with her husband and her role as a mother. She smiled and laughed often when speaking about these two aspects of her life.

**Work**

Samantha orientated the interviewer to this narrative by saying that she had to work shortly after her father died. She divided her two forms of work into the work that she did before she had her first child and the work that she did after she became a mother.
The characters in this narrative were her parents, siblings, husband, employers, as well as her children, and the people that she delivered her services too.

The complications in this narrative arose when her father died, and the family's need for money forced her into leaving school in order to find a job. She then experienced the complication of how she was going to find a job and how her employees were going to deal with her scars. She explained that after her father died, both of her sisters were working in a factory. Her mother thought that Samantha should not go and work in a factory because it would make her 'loud', and that she thought it would be better if she worked more directly with people to try and help her get over her fear of being in public because of her scars. In the narrative she explained that she got a job as a beauty consultant at a chemist and that she did this until her first child was born. After this, she changed her job to dressmaking and alterations, and this presented with further complications with regard to people seeing her scars and reacting to them.

Her evaluation of this narrative came in the form of her saying that for her children, it is very important that they get a job, thus implying that in her value system, occupations are held in high esteem. Also her leaving school in order to work to survive financially indicated that getting a job was a very important part of her life. However, in her current occupation, viz., sewing, she referred to it as more of a hobby than a profession. This suggests that since the birth of her first child, her work has become significantly less important to her.

In resolution to her complication of finding a job where she could deal with people, she explained that she went for an interview for the job as a beauty consultant and that her boss was very understanding and supportive towards her. She then explained that she used to particularly enjoy putting make-up on other peoples' faces and making recommendations about what type of cosmetics they should use. Thus, in so obviously dealing with 'how the face looks' and 'helping people look beautiful', she was able to get a positive affirmation for herself, and deal with her fear around her disfigurement directly. With regard to her having a child, she found resolution in thinking that motherhood is a fulltime job, and saying that since her husband was the primary
breadwinner of the house that she was able to just do her sewing because she enjoyed it. Samantha also described some difficulties that she had with some of her clients and found resolution in sitting and talking to them. She stated that “they come in here and they um, ask for the dress maker and I say that I am the dressmaker and the first thing they said is “What happened to your face?” . And I sit them down and I tell them. “Are you happy now, you know the whole story now, so now are you happy?” And it is almost like um, it fades to the background when I start talking to people. It fades and its like, they say you don’t see the mark anymore. Sometimes I look in the mirror and I am like “yuk”, but um, like I said, it doesn’t really bother me.

The narrative tone is that of challenge in terms of overcoming her difficulties in trying to get work and in working. She spoke with pride about her experience of working, but raised her voice more aggressively when she spoke about how others reacted to her scars in the work environment, suggesting that this reaction from others angered her.

**Core Narrative**
The core narrative was that being burnt had made a great impact on her personal identity, life narrative, and her relationships with others, and that although it had been very difficult for her to deal with her burning; she had found a resolution to many of the complications arising out of it. School was the most difficult time for her and it was only through her relationship with her family, and when she met her husband, that she was able to find resolution to her difficulties at school. Similarly, her role as a mother and wife was also difficult for her, with both of these things focussing on her husband to resolve the complications of these life narratives.
Case II  Cynthia

Context
Cynthia described herself in this way: ‘I am 25, I am a Virgo, um, I am a single parent, my son will be 8 in December. I have got a boyfriend but it is not my son’s father. I never matriculated; I have got a Grade 10 certificate. I’ve never really worked, all the work that I did was contract work’. She was a coloured woman who lived in a house in Ocean View (a suburb of Cape Town), with her mother, step-father, and sister. She was willing to take part in the interview and the interview took place in her house. The mother ran a small shop selling sweets and potato chips from the house, and during the interview, two people came into the house to buy sweets, but Cynthia turned them away for the sake of the interview. Cynthia was visibly scarred on her face, arms, neck and scalp. She was confident and spoke fluent English throughout the interview.

The Burning
Cynthia’s narrative of being burnt was orientated with her saying that she was burnt when she was two years old. She explained that it happened in her house when her mother was not there. The house caught alight and it burnt down with her in it.

The main complication of this narrative was the burn incident itself. She stated that ‘to my knowledge, somebody set my mother’s place on fire. I was little when I was in the place, that is how the fire started. After the rescue and everything, I was rushed to hospital and obviously lay there for quite some time. I don’t remember that. But once I was released, I went through every single process that every burn victim go through in their healing process. Going back to hospital, therapy, operations, counselling. All that, I had various operations, I had tissue expanders, where they stretch the skin over the burns, I had skin grafts, I had my left ear built up, I had my own left eye-brow built up with my own hair, because I was basically burnt all on the left side. Other than that, I don’t remember much’. The other complication of this narrative was that she did not remember what happened and that all that she knew was what she had been told. Consequently, she had what she saw as unanswered questions with regard to the burning. These questions were ‘how the fire really started? Was there a particular reason? Was it revenge or anything?’
She evaluated her complication around being burnt by using it as one of her defining characteristics, saying that she has been burnt her whole life and she believed that it is part of who she is. She also referred to the Red Cross Children’s hospital as being a second home to her when she was a child, illustrating the amount of time that she spent there as well as how familiar she became with being in a setting that treated burns. With regard to evaluating her complication of not really knowing what happened with the burning, she stated that ‘I have done research, I have been to the library in Cape Town. I went as far back as September the 20th 1982, until December that year. And I looked in all the major newspapers and local papers, and I didn’t find anything of a fire like this that took place’. She also stated that she often had thoughts about what would happen if she did find out, and said, ‘It will always be in the back of my mind, I always said, and I always say I would like to know who started to the fire. ‘Cos I would like walk up to that person and say: Do you remember me? Do you know who I am? I am that little girl that was crying for my life, and I would just like to know why? What made them do that? What led to that?’

In terms of the resolution of her burns, she explained that with regard to her having operations to improve the scars, she had decided not to have any more operations and said ‘I am not interested in any more operations; I don’t feel like having any more operations. I feel it is time wasting, spending it in hospital, when I could be doing other things that need my attention like my son, job, educating people where I can...not spend it in hospital’. In terms of her resolution of her unanswered questions, she stated that she did not believe that she would have the necessary emotional strength to be able to deal with her finding out that the burning was not an accident and said ‘maybe I am just not meant to know what really happened. I have learnt that you don’t unravel things that are meant to be. If we are meant to know things, then it automatically comes out. But if we are not meant to know, don’t mess with it, don’t, scratch unnecessary things out, because it could be damaging’. In addition to this, she also said one of the results of the burning was that she cried a lot about it when she thought of it, and resolved this by normalising it, saying: ‘It took me very long to be where I am now. It did not happen over night. That is why when young people with burns, I can
say it is not easy, I know that it is not easy and I say to them it is not easy and it is fine to cry, because I still cry, I have been in this game for so long. And I still feel the pain and I still cry, and it is normal to cry, it is healthy to cry. People cry because people die, people cry at weddings, people cry at accidents, they cry at the movies, it is normal to cry, and it is healthy to cry. In addition to this, Cynthia also resolved her difficulties in being burnt in saying that she had drawn many positive things out of it. She explained that if she did meet the person that started the fire, she would thank him for doing so and that if she had to have her life over, she would choose to be burnt, because it had allowed her to become much 'stronger' within herself, and she stated that if she could deal with getting burnt, then she could 'deal with anything'.

The tone of this narrative began pessimistically in describing the difficulties that Cynthia had as a result of the burn, but ended on an optimistic note with regard to her making meaning out of the burn and incorporating it into her identity. She was visibly upset when she talked about the burning and cried at times.

The Disfigurement
Cynthia orientated this narrative by saying that she had had to deal with her scars for as long as she could remember as a result of her being burnt when she was two years old. The characters of this narrative were many of the people that she had met in her life, including the people that went to school with her and other adults and children that she had encountered in her adolescent and adult life.

The complications of this narrative were how people had treated her as a result of her scarring and disfigurement. At school, she explained that it was difficult for her as many of the children did not want to play with her and called her names such as “Kentucky Fried Chicken”, or they would say “Chucky” (a doll from a horror movie) or “’gebrande gesig”\(^4\), stuff like that. Later in her adult life she said that it was not only children who made remarks about her but that adults also called her names. She explained that this was very difficult for her to understand, as she believed that the adults should have known better. The disfigurement was also mentioned as a factor in her romantic

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\(^4\) Afrikaans for burnt face.
relationships, and she stated that often it was difficult for her boyfriend to understand how important it was to sometimes wear clothing that revealed her burns, so that she could feel 'normal'.

In terms of evaluating this narrative, she stated that often she just went into her room at night and cried, and that she believed that it was important not to show the people who mocked her how much they affected her and hurt her. She also explained that her disfigurement was something that she has always had to deal with and had shaped most, if not all of her interactions with people in some way.

In finding resolution to her complication of the disfigurement, Cynthia stated that in order to process her difficulties she wrote. She stated that 'I will put pen to paper and write, and when I finished writing I would burn it up so that nobody could see what I had written, but I have offloaded all that heavy weight. And then I feel better. I don’t like people must know my business because people are funny, maybe it is just because I am burnt that I feel that...so I trust pen and paper'. In terms of dealing with the fact that children and adults still called her names she stated that 'children will be children', and that adults do it because they do not have any education about burns. She found another resolution for her complications of her disfigurements in her involvement with the World Burn Foundation camps. She stated that the camps ‘I feel is good for me, because at every camp that I go to, I feel that there is a mutual, how can I say, a mutual benefit, because I benefit in the sense that every time I do this camp with WBF, I get more closure for myself. Where my burns are concerned. And in the same sense, helping young burn survivors who is now where I have been years ago and I have overcome that. So I feel that I can be a pillar of strength for them ‘cos I know exactly where they are coming from and what they are going through’. She also stated that she believed that only a burn survivor can really know what a child that has just been burnt is going to go through. With regard to her difficulties with her boyfriend, she explained that it was important to go out and have fun in a ‘normal’ way and that she believed that her relationship with him was also ‘normal’, in that they did what ‘all other’ couples do. She also said that he did not pity her because she was burnt, and that she saw this as being a positive attribute in their relationship. When asked what she would say to a
burn survivor that had just been burnt, she said: 'Don't waste 19 years of your life feeling sorry for yourself. Questioning why you burnt, what could you have done. 'Cos if you could do anything you wouldn't be burnt. So rather focus all that negativity into positivity and make the best of the situation...It is entirely up to you, it is not easy, but the sooner you deal with it, the better'.

The tone of this narrative was one of acknowledgement of the difficulty that being disfigured entailed, but at the same time, being optimistic with regard to the possibility of dealing with it and leading a 'normal' life. It was not as upsetting for her to talk about the disfigurement, as it was for her to give her account of the actual burning.

Motherhood

Cynthia orientated this narrative by talking about her relationship with her mother as well as her relationship with her son, as a mother.

She stated that the complications with her mother arose out of her blaming her mother for the burn incident. Cynthia stated that she had 'A lot of anger towards my mother, because I blame her for being burnt. Because if she hadn't left me there, I most probably would not be burnt'. She then went on to explain that there were times when her and her mother fought and her mother said that she should have left Cynthia in the house and let her burn to death. The complication around her being a mother was that she had a lot of responsibility she felt she was initially not ready for. Her son was also affected by her burn. She explained that the other children at school often teased him as a result of her being burnt. She also explained that 'it is difficult being a single mother because I am facing issues now with my son being in school, people tease him about me being burnt, and at one stage he wanted to burn himself. He always used to play with matches and things, and when I said to him he mustn't use he would say that I want to play with matches because then I will get a burn and look like you, and things like that'. She said that he believed that if he got burnt, then the children would tease him about his burns rather than his mother about hers.
Cynthia evaluated her relationship with her mother as being very important and mentioned it several times in the interview. With regard to evaluating her relationship with her son, she mentioned that becoming a mother was one of the most significant experiences of her life.

In resolution to her complications with her mother, Cynthia stated that 'But then also there must have been a reason why I was there (in the house when the fire was started). She couldn’t perhaps have me with her at the time.’ She also stated that by becoming a mother herself, she was able to understand more where her mother was coming from and that she felt that her mother would never intentionally try and harm her. Cynthia also explained that she was a very difficult child as a result of the burns and the difficulty that she had as a result of her disfigurement. She stated that often she would lash out at her mother, as she was closest to her and that therefore she felt like she could fight with her and let her know how she was really feeling. Similarly she noticed with her own child that whenever he was angry, she got all of the anger and aggression because she was his mother. As a result of her son trying to burn himself, Cynthia was very vigilant about making sure that he did not have access to matches or fire, and tried to talk to him about her scars as much as possible. She also took him to the burn camps that the World Burn Foundation ran in order to try and show him that there are lots of other people who are burnt, and she said that he enjoyed these camps very much.

The tone of this narrative was one of difficulty, conflict, responsibility and getting to a stage of ambivalence with regard to her mother and trying to be as good a mother to her son as possible.

Core Narrative
Looking at the multiple narratives that arose out of the interview, it seemed that Cynthia has had to deal with the difficulties around being burnt all her life (for as long as she could remember), and stated ‘This is what I am, this is Cynthia’. She explained that although it had been difficult and had been a major factor in her relationships and interactions with others, it had also given her the opportunity to feel stronger within
herself for having gone through all of this difficulty. She stated’ I think that my burn moulded me into the type of person that I am today, with all the adjustments that I had to make, and I personally feel that I am a stronger human being than anybody who isn’t burnt. Because of, I had more challenges in life, that I had to overcome at a very young age. And I have overcome it and I have dealt with it, and that is all things that contributed to what I am. ‘Cos I see people my age that have drug problems because they can’t handle a simple problem that they are going through. Where I won’t relate to drugs because for me I have been through such a lot and if I could overcome that, I do not see anything standing in my way of becoming anything that I want to become or doing anything that I want to do. Because the most difficult challenge in my life I have overcome, I have accepted the fact that I am burnt’.
Case III  Larry

Context
Larry was a 23 year old coloured man living in an informal dwelling\(^5\) outside his sister’s house in Ocean View (a suburb of Cape Town). He had obtained his Grade 12 and at the time of the interview was working as a school teacher at the local high school. He was eager to participate in the research, spoke confidently throughout the interview and was very appreciative to have the opportunity to speak with the interviewer. He described himself as ‘a nice person, ja, I will say a “go getter”, I like to work hard and, I wont let anything keep me down in life’. He also said that he is ‘an everyday person...easy to get along with’.

The Burning
Larry orientated his narrative about being burnt by saying that it happened when he was 5 years old. The characters involved in this narrative were himself, his mother and his sisters.

The main complication of this narrative was the burning incident itself. He explained that ‘I just remember I used to like playing with balls, soccer balls. And, I was playing in the kitchen and the ball bounced up onto the stove, and we had this fire stove, this, you put the wood in there. I want to get the ball, so in order to get the ball I had to get up to the, to stove, and I was too short, and when I reached for the ball, I, I my arm went against the handle. The pot, the boiling water was in, when I came down with the ball, and the, the handle, it flipped over onto my arm’. He also said that he was told that he didn’t initially cry, saying ‘and, my sister still tell me that I didn’t even cry because, she think I was too shocked. But when I go to the hospital, I then I started to feel the pain. That is what she told me. ‘Cos they were looking at me like why, why aren’t you crying?’ Another complication of this narrative was that Larry thought that it was his mother’s fault. He said ‘I felt like um, it was my mommy’s fault. Because I got burnt

\(^5\) A room that is constructed from scrap metal and wood.
when I was say 5 years old. I was playing in the kitchen, and there was no-one around. The water fell on me, so, that is how I felt, it was my mommy’s fault.’

The evaluation of this narrative came in Larry stating that it had always been too painful for him to talk about and that the interview was the first time that he had ever talked about it to anyone in such detail.

In resolution to this, he said that he just blocked all thoughts about his burning out of his mind and that this was how he had dealt with it over the years. He also said that in comparison to his other difficulties in his life such as his issues with his mother, the issue relating to his burning was not as important. When asked how he felt about sharing his burn experience with someone for the first time, he said that he felt ‘better, like a load has been lifted off my shoulders’.

The tone of this narrative was largely pessimistic in nature, and echoed Larry’s difficulties that he had had in his life, with the burning just being one of many. He spoke in stops and starts when speaking about the burning, and the interviewer got the impression that Larry was trying to restrict his affect and not display strong emotions when he talked about his difficulties.

The Disfigurement

Larry orientated this narrative by saying that he had had to deal with people reacting to his scars ever since he was burnt when he was five. He referred mainly to the people in Ocean View community reacting to his scars.

The complication of this narrative was the way that people reacted to his scars and how this made Larry feel about himself. He explained that often people would make fun of him and call him names as a result of his scars and this often ‘broke him down’ to the point where he had wanted to commit suicide on some occasions. When the interviewer enquired about this a little further, he said that at those times when he wanted to commit suicide, it was always a combination of many difficulties such as financial
concerns and difficulties with his mother, and that his disfigurement was more of a final precipitant to him wanting to take his life.

The evaluation of this narrative came in the intensity of the complication, i.e. the fact that Larry had been so upset at times by peoples’ reaction to his scars that he had considered committing suicide.

In resolution to these complications, Larry stated that he often ‘turned to God for answers’, and that he would always make sense of his difficulties as them being part of ‘God’s plan’ for him. While he had often had ideation about taking his life, he never made any attempts. He viewed each experience, where he was mocked as a result of his burns, as something which made him stronger. Larry said that more recently, he often wrote about his difficulties and sung about them in the form of hip-hop rap, saying ‘When I got up in the morning I always thought positive, and not let nothing bother me, or something about, my scars, and I would always put it down on paper, I would always write with them down, and ja, that is how I get over my difficulties and stuff like that, I just learnt to put it down’. He also said that he wanted to make a recording of this so others might benefit from his expression of feelings concerning his struggles.

The tone of the narrative was one of difficulty with regard to his disfigurement, and that despite this, Larry was able to deal with it by thinking about the mocking in a different way and finding a constructive way to express how he felt about. Again, while he was talking about his disfigurement, the interviewer got the impression that strong negative emotions were being held back in the interview.

Parental figures
Larry orientated this narrative by referring to himself, his mother, father and sisters, as well as his school and friends at school. He said that this had been a factor in his life for as long as he could remember.

One of the complications of this narrative was that his father died when Larry was nine. Another complication arose with his mother, where he explained that she was ‘never
there for me’, and that ‘I never really grew up with her. I never had the real mother figure’. When asked why this was so, he said that he never asked his mother why and he believed that not knowing ‘keeps him going’, as he would rather not know. He said ‘I was just angry about, why didn’t I have a mommy like...even though my dad died, why didn’t I have this close relationship with my mom? Why didn’t she take me with wherever she went? Why didn’t she read me a bedtime story? You know, why wasn’t my school-fees always paid? Why did I always have to ask someone else to give me stuff? Why did, why did I have to live here?’

Larry evaluated this narrative by saying that it was probably the most difficult aspect of his life, and that he constantly thought about it, and had to make great efforts to not let his mother make him feel ‘down’.

In resolution to the complication with his father, he said that it was sad, but that he was never really close to him, and so he was not sad for a long time after he died. With regard to his mother he stated, ‘I am not cross or mad at my mommy. That actually made me a stronger boy. A stronger person in that sense that I could go to other people’s place, I had, I can respect other people, understand, I can, I know how to behave myself when I am with other people. At staying at other people’s house or spending time maybe for the holidays and my friend’s house or something like that. Because I didn’t have that, mother figure, and more of, my two friends, I would say my two best friends, their mommy was more like my mother figures than, you know, but that actually made me a more stronger person, in the sense that I can go out there, I can get myself a flat or a house, and I can say to myself I know how to, how can I say, I know how to stand on my own two feet, I know how to do the basic stuff, that will keep me as a person alive, and well. So, in a sense, I could also thank my mother, understand because most of the boys that I know, my age or older than me still are much dependent on their mother, and stuff like that, so, in a sense, I am very grateful, for the way that I was brought up’. Therefore he saw his experience as something that had made him stronger, and also saw other people in his life as being worse off than himself as a result of not having gone through this experience.
The tone of this narrative was one of sadness and frustration at having so many unanswered questions, despite Larry's ability to always see the positive side of things.

**School and work**

Larry orientated this narrative by referring to the time when he was at school up to the time of the interview. The characters involved were his peers at school, his teachers, as well as the head master of the school and the pupils that he taught. He was working as a governing body appointed school teacher that taught life skills, such as communication and religious studies.

The complications of this narrative were when the other children used to call him names such as 'chicken licken'. Larry also explained that this was difficult, 'being one of the children that never had their school fees paid. Um, never had enough books, always had to get books from the teachers. Um, it was basically, I never had bread to take with me to school; I had to get bread from the school. So that was like, kind of the difficulties that I had. And ja, school clothes...school shoes'. With regard to his work, the major complication was his need for money.

Larry evaluated this narrative by mentioning his experience at school as being very informative as to who he was as a person, and talked about his work in the school as one of the most significant experiences of his life.

In resolution to the children calling him names he said that he 'just always had to be the child that was having the most fun' and that this distracted him. Larry said that in Ocean View, other people always tried to bring one 'down', and it was important to be positive about one's life. He explained that because he did not have enough money for clothes and food, that he would often receive these things from his friends at school's mothers. At school he said: 'I always had fun, I always had friends. The most friends, I have always, I did not have all the money or the clothes that other people had but I was always accepted. You understand, because, I was, I could fit me with anyone. With boys, whether it was boys or girls. You could just fit me in; I was always the type in

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6 A South African version of Kentucky Fried Chicken.
class that do his work. I wasn’t the most, I wasn’t the sharpest tool in the shed, I work and the teachers liked me for that, and it is just that um, because of my burn scar, and when it came to sports and stuff like that, um, they used to ask me um, or one or two that made fun of my, but I didn’t care because I always had a friend or two that I had on my back, and so, school, primary school I say, excellent. And high school, no problem, I had, I never was bullied and, I didn’t fail at school and like I told you, I was always in the soccer team, and you know part of the um, the English, we had this club that we, the English children that spoke Afrikaans, that were quite good in the English, and ja, I was liked, I was liked by the teachers. School wasn’t so tough’. Larry spoke with pride about his work and said that he enjoyed working with children where he could see that he was making a difference. He said ‘That is the whole reason why I get up in the morning. Ja, by helping them, I feel like I am doing something positive. In Ocean View at least. By helping them, they could help themselves’.

The tone of this narrative was one of strong resilience to difficulty, and finding solutions and resolutions to difficulties by doing and thinking about things that help others, as well as himself.

Core Narrative
The core narrative that ran throughout the above narratives was that although the burns were difficult to deal with, other factors in his life were of greater significance to him, such as not having a mother figure and growing up in an impoverished environment. Therefore it was difficult for Larry to have to deal with his burn, the disfigurement, the fact that he did not have a close relationship with his mother as well as him growing up in poverty. Consequently, it seems as though his issues around his burns were made worse in the context of these other difficulties. However, despite this Larry was able to deal with his traumas by choosing not to focus on his difficulties but rather create opportunities in his life where he could focus on his life in a more positive way.
Case IV   Shirley

Context
Shirley was a 29 year old coloured woman who lived with her parents and brother in a house in Mitchell’s Plain. She was hesitant to participate in the interview but agreed after the interviewer explained that the interview would be confidential. She was visibly burnt on her neck, back and arms. Shirley spoke softly and hesitantly throughout the interview. During the interview, she burst into tears several times, but said that it was good for her to talk about her experience.

The Burning
Shirley orientated this narrative by saying that she was burnt two years before in a motor vehicle accident. The characters involved were the other people in the accident, the staff at Tygerberg Hospital burns unit, her mother, son and friends.

In terms of complications, Shirley talked about what happened, saying she was in a car accident with four of her friends when another car crashed into them. She then talked about her time in hospital, which was for about a month after the accident. One of the major difficulties that she had during this time was not being able to see her son. ‘It is not a nice experience...to be burnt in a car, is not nice. I actually risked my life, when we were in the car accident when our car burnt, and the guy bumped into us...into us, I actually risked my life by opening the door, to get myself out of the car, while the car was moving. So I thought to myself, well, I was sitting in the back and I felt the burn on my back, and I thought to myself, I must get out of this car. I am not going to burn to death in this car. But to get burnt, it is not nice. And I was in Tygerburg for a whole month. I was laying there with pains, and I cried and I told myself, why doesn’t God just take me? ‘Cos I couldn’t take the pain anymore, it was too painful for me. And even like now, I won’t say that I am totally recovered, like this time, I always tell my friends two years back, I was still in hospital, lying in hospital. It is now two years back from my accident. And I was still in hospital this time, and what I also told them was what really hurt was that I could not even see my child’. Another complication that arose in this narrative was that the person responsible for the accident was not being charged for
attempted murder as a result of there not being any witnesses at the scene of the car crash, other than those involved.

In evaluating this narrative, Shirley said that being burnt was not an experience that she would wish on anyone, and that it was the most horrific experience of her life.

One of the major results of Shirley being burnt was that she did not leave her house and ‘go out’ with her friends and family as often as she used too. ‘I do that a lot; I spend time on my own. I think that really it was after the accident, that is why I like to spend time on my own, and think about what happened, and while I think about that, I just tell myself that God gave me another chance to live. Because after my accident, I just stay at home, I just don’t want to go out so much anymore.’ She also said that she was more irritable and wanted to spend more time on her own. In resolution to her time in the hospital, she said that knowing that she was still going to be able to be a mother to her child made it possible for her to endure the pain of the healing procedures. She said ‘And so my mommy told him, Kelvin (her son) you must sit still, that you mustn’t cry or anything, but your mommy is in hospital, and she said that when she told him that your mommy is in hospital, and he started crying and he got hysterical. And when they told me, I burst out in tears. I just thought to myself, I just thought that it is a miracle, because I could see my child now’. With regard to the person responsible for the accident not being charged she said ‘what is the cause, they are going to lock him up, I am not going to get the same again. My scars is going to be still there. So why lock him up, we are not going to get better. We are going to be scarred for life’. Another result of the burning was that she got ‘hysterical’ every time she saw children around hot liquids or flames, and she stated that her friends always told her that she was being ridiculous, but she still worried about others getting burnt.

The tone of this narrative was of intense physical and acute psychological trauma as a result of the accident and burning. Although it had been two years since the accident, it seemed as though that Shirley was still finding it difficult to deal with the trauma of the accident. She seemed anxious to talk about her experience and was clearly upset when she did.
The Disfigurement

Shirley orientated this narrative by identifying her friends as well as some other children and adults in her community in Mitchell’s Plain.

The complication of this narrative arose when some children and adults called her names as a result of her scars. Shirley said ‘I was discharged out of hospital. I was laying there at home, my mommy looked after me. And then she tell me she want to take me out and I tell her that I don’t want to go out, because of my scars. And then eventually I went out, I would sit in the taxi or so there the people look at me, they look at you and I get cross, but then I go to therapy and the therapist told me that if they look at me, then I must give them a hug. And I must tell them what it is, to get burnt’. With regard to her friends and family, there was the complication of how they were going to sensitively deal with Shirley’s scars.

In terms of evaluating this narrative, she started crying when she was talking about people calling her names, indicating that this narrative held a strong emotional valency with her.

In finding resolution to others calling her names, she said that she purposefully wore revealing clothing, such that she could give the message that she was not ashamed of her scars. She also said that her ‘therapist’ (a counsellor in her community) told her to tell people what happened rather than shout at them or get aggressive, and she said that this had helped. She also said ‘when I was in the car accident, I said that I would never drive in a car again. And my therapist said that to come over my fear, I must get into a car and I must drive. I must drive in my own car. But there are some times when I drive my own car and I get that fear, I get that feeling. Even in the beginning, when I used to get scared and I get a nightmare, then I just stand up, and I start crying, But now that I went to my therapist, she said that everything will be scarred for life’. With regard to her family and friends, she said that she always kept her sense of humour, and that this was her way of dealing with it. She said ‘my friends have accepted the way that I look. I would say that I am very lucky; they accepted the way that I look. And
then sometimes we will go in the photos and stuff, and they would tell me look at you and look at you now. You look like Kentucky Fried...I will make fun of it and I will laugh with them. If there are many of my friends, they will get cross because I make fun of my scars. Then I tell them, don’t get cross, it is just my way of getting over the burn, it is just my way. I don’t want to make fun because I mean it, it is just my way. Even if it is cold, I don’t wear long stuff like that, and they will ask me, don’t you get cold? And I will tell them I have a thick skin, I don’t get cold. Stuff like that; I will make fun of myself. That is my way of dealing with myself. Like even my friend at work, he will touch my back and say that this is genuine leather skin. And I will tell him, you must touch this genuine leather skin. That is how I get over it. ‘Cos I said that I am not going to feel sorry for myself, ‘cos that is not going to help. Because I could have looked worse than this.

The narrative tone of her disfigurement was much more optimistic than that of her actual burning, and although she stated that it was difficult at times, she had found ways of dealing with how others reacted to her scars, by using humour in defence against her difficulties.

**Being a mother**

Shirley orientated this narrative by referring to herself as mother of her 6 year old boy. The characters in this narrative were her son, her mother-in-law, the father of the child, and other children that her child plays with.

The complications of this narrative were the difficulties that she had in needing to work. Consequently, her son lived with her mother-in-law, and Shirley only saw him when she was not working. The father and Shirley were no longer involved, but she did not indicate that this was any problem as far as her son was concerned. Shirley said that one of the most difficult things about the burning was that she was not able to see her child regularly as he would get so upset in the burns unit. Shirley said that initially, it was difficult for her son to see her scars and that he used to cry a lot. Other complications arose when some of the children that her son played with called her names because of her scars, and this distressed him.
She evaluated this narrative by saying that becoming a mother was the most significant experience of her life, and this was reinforced by her emphasis on motherhood in all her other narratives. ‘For me, the happiest thing for me is seeing my child everyday. It is the happiest thing for me to see how he is growing. That is the happiest thing for me because I am still there for him’.

In resolution to her not being able to live with her son, she said that him living with her mother-in-law was the best arrangement, and that she saw him often enough. Shirley explained that although it was difficult when she was in hospital, as soon as she came out, she spent a lot of time with him and that this had made it easier for her. In terms of her son having difficulty with her scars, she always joked with him about the scars and she said that this helped. She stated ‘and he said: “you know when you always make fun of me, and laugh with me, and mommy remember, you were almost Kentucky fried chicken.” And then I laughed with him’. When other children have made fun of her she would say to him that they were just children and that it did not bother her and he should not worry about it.

The narrative tone of this aspect of Shirley’s life narrative was optimistic in her feelings towards her son. However it was very clear that the burn made her very upset as it interfered with her role as a mother.

**Core Narrative**

The core narrative of this interview was that the burning has been a large disruption in terms of Shirley’s life narrative and that it had affected her very much with regard to her behaviour (staying at home) as well as with her relationships with others (her friends and family). She explained ‘changes in my life is basically that I used to, before the accident, I used to go out. Every weekend and that I used to go partying. And now after the accident, I don’t go and do that. I will just be at home or be relaxing. And like I said, even like I um, the way I am, because it changed. There is a lot that changed, now everyone will ask me, why are you like that, why are you so grumpy or why are you so irritated or so...you know I would just tell them to leave me alone. Just leave
me, don’t talk to me, just leave me. But then I will go back to them and I will apologise and I will just tell them, I am sorry but, I didn’t mean it, but there are just times when I feel like I don’t want to talk to anyone. Then that is the time when everything just comes back to me. Then I think about the accident, how it happened and how I rolled myself out of the car. How everything just comes back to me. And I always tell myself, when I rolled myself out of the car, the cars that came, could have bumped me and then I could have been dead. Just think about all of that’.
Case V  Thomas

Context

Thomas was a 65 year old white man that lived with his wife and his four step-children in a house in the suburb of the Strand. He had a Master’s degree in Education and was retired. Over the phone, when asked if he was a burn survivor, he said that he was but that he was lucky enough to not have his genitals burnt. He was eager to participate in the interview and was very forthcoming with his stories about his life. The interviewer noticed scars on his face and arms. Both of his hands only had two fingers. There was a clear demarcation in his narrative about his life before and after the burn, and the following analysis reflects that.

Before the burning

Thomas orientated this narrative by referring to his life before the burn. The characters involved were himself, his non-identical twin brother, his mother, his work colleagues, and a few unnamed women that he was attracted to.

The complications that arose out of this narrative were that he was born with one of his hands being disfigured (only having his thumb and his pointing finger, and those being joined together), he felt like he was not as clever as his brother and he had always had difficulty in approaching women.

In evaluating this narrative, Thomas explained that these complications interfered with his self confidence and that this was a major difficulty for him saying ‘all of those things made me not feel very sure of myself, and I think that that made me be a bit nervous of people. It is important to be able to have confidence, especially with women, with all people...’

In resolution to these complications, Thomas explained that despite his difficulties ‘my parents they brought us up as equals, like I haven’t had any excuse for not doing anything, and I am so thankful for that. So, they supported me in a very balanced way and I am grateful for that’. He also stated that his relationships with his twin brother and mother were important to him, and that they always helped him feel better about
himself. He also said that being a Christian had helped him come to terms with the fact that he was born with a disfigured hand and said 'this was part of God's plan for me'. With regard to Thomas having difficulty in speaking to or wooing women, he said that he preferred to invest that energy into other things in his life like his relationship with his brother, mother and God. Thomas also explained that when he met people for the first time and they saw his hand, he would explain that he was born with it, and that he usually made a joke about it. He said 'with things like this your sense of humour is very useful'.

The tone of this narrative was largely optimistic, and Thomas laughed regularly when he talked about his life before the burn, even though he said that there were times when life was difficult for him due to the above-mentioned complications.

The burning
Thomas orientated this narrative by saying that the burning happened when he was 28 years old, and that he was working as a teacher in Calvinia (a town in the Northern Cape province of South Africa). The characters of this narrative were himself, the hospital staff at Tygerberg hospital, his mother, brother, wife, step-children, and some unnamed people that Thomas had encountered briefly after the burn took place.

The main complication of this narrative was the burn incident. Thomas explained that 'I drove over the Du Toit's Kloof pass, and I filled up with petrol, 5 litres I think. And on the top of the pass I took the petrol, it was just next to me, then there was a corner and I drove off this side, the parking was there...At that point something must of happened, and I just drove straight over the cliff and the tin of petrol opened on me and it caught fire. I just remember the flames etc. but then luckily the car stopped and I couldn't see anything at that stage. The car doors opened to the front. And I tried, I tried to open the right hand side but I couldn't open that so I jumped out of the left hand side and I ran away from the car. There was a cliff and a wind blowing down and I fell down and I rolled in the grass so that I could extinguish the flames, and then uh, I cant say what time span, but it was about six men came to my rescue and they carried me to the main road'. Thomas then said that when he was in Tygerberg Burns Unit, he had two very
bad experiences with two members of staff, viz. the occupational therapist and the pastor at the ward. He stated that ‘I had an occupational therapist who was, she was English speaking which I think was a good thing because I wanted to swear at her um, but then they would first have to translate this word (He laughs). I suppose she was good. She was like a very hard, whenever I made a sound she just shouted at me “shut up”. And I was sometimes, I was so furious, I wanted to kill her’. With the pastor he said ‘he came to me and I have always had the feeling that he was approaching me from a certain angle, almost like...if you...according to this and this, you should be feeling this way. And I was so irritated by it. He must just get away. I needed spiritual support, but he...it was so superficial. I...I hated him’. Thomas also talked about his disfigurement afterwards as being difficult to deal with, saying ‘it was distressing to uh...to live...lots of people don’t know how to handle the situation...they don’t look at you, they don’t talk to you, they just ignore you and, they talk, they talk behind your back, and sometimes it is very funny but sometimes one is just not in the right mood for that’. Another complication arose with his work as a teacher and how his colleagues and pupils reacted to the burns. He said that many of the staff members told him that he was not fit for teaching as the children would not be able to accept him. In relation to his pupils, he said that when he first had a new class that they asked a lot of questions about his burns, and that some of them laughed at him when he was not looking.

Thomas evaluated this narrative by saying that the burn experience was one of the most significant experiences in his life. Before the interviewer asked him any questions, he sat down to the interview and talked about how difficult it had been for him to deal with his scars. This was taken as a covert indication that this narrative is particularly important for him.

In resolution to the complication around the burn he stated that he considered himself lucky as he had seen other people who had been scarred in much more disfiguring ways. With the occupational therapist, he said that he went back into the ward at Tygerberg and saw that the occupational therapist had a broken nose, and had a fantasy that he went up to her and twisted it and told her to ‘shut up’. With the pastor, he said that he felt like he was doing the best that he could, and that he didn’t know
what he was doing. With regard to the disfigurement, Thomas stated that people said things because they didn’t know better and that he just told himself this when he was called names. He also said that finding his wife was a great revelation in his coming to terms with the scarring, and that his sense of humour had also been very protective for him. He said that if he was to have his life over, he would choose to be burnt again as he felt that it has made him a better person. He felt he was more sensitive and appreciative of his life as a result of the burn. In relation to his difficulties with his colleagues, he said that he would sit down with them and explain to them what happened and say to them that he needed to be given the opportunity to see whether he could get the pupils to look past his burns. With the pupils, he explained to them what happened to him when he first met them and said that often it was useful to make jokes about it, as this would make the children respect him more.

In ascertaining the narrative tone, it was noticeable that Thomas laughed through much of this narrative, with the exception of when he spoke about his experience in hospital. A further exception was when people called him names and he was ‘not in the mood’, at which times he clenched his teeth and seemed angry. His humour fulfilled a strong defensive function in protection from his anger and pain of other people’s negative reactions towards him.

**Core narrative**

From the above it was clear that there was a divide in Thomas’ narrative between the time before he was burnt and the time after the burning. He described his life before the burn as having some difficulties in certain areas (the disfigurement of his hand and his relationship with women) and that some of these difficulties were exacerbated after the burn took place. He then said that although the burn created a lot more difficulties, that in terms of his general ‘sense of himself’, he felt as though the burning and having the scars had made him more sensitive and humble and that these were qualities that he held in high esteem for himself. The burn thus represented a core life-changing experience that Thomas viewed as being not only painful and difficult, but valuable and useful as well.
Case VI  Celiwe

Context
Celiwe was a 24 year old black woman, living on her own in Nyanga (an informal settlement in Cape Town). She was at the time of the interview studying nursing, and was unmarried. She said ‘I am from a family…not a rich family, but not a poor family, somewhere in between. I have 3 brothers and sister, and I am the oldest. Um, I am a reborn Christian’. She was very willing to take part in the interview, and was visibly burnt from her chin down to her chest. Celiwe’s first language was Xhosa, but she was able to understand and speak English fluently throughout the interview.

The Burning
Celiwe orientated this narrative by saying that it took place in the Eastern Cape (where she grew up) and that she was 12 years old when the burn took place. The characters of this narrative were her family and the hospital staff at the burns unit where she was treated.

The complication of the burning was explained as: ‘while I was younger, I think I was doing standard two, um, I was suffering from epilepsy. Until the age of, at that time, up until the age of 14 years. Then I started…while I was doing standard two I get burnt. It was wintertime, we were around the fire, then it was me and my youngest sister and my younger brother, the one was born in 1990, the other in 1993. My parents were not there. Then…I fall in the fire, and that is how I got burnt’. In saying this she explained that she was burnt while having an epileptic fit, and also stated that having epilepsy was a ‘terrible experience’. Other complications in this narrative arose when she was hospitalised. Celiwe explained that it was difficult for her as her parents were only able to visit her once or twice a month. Consequently, she felt ‘dependent on that place’, the hospital. Celiwe also explained that she had to go for several appointments and surgeries as she was seriously disabled by the burn for a significant part of her adolescence.

Celiwe evaluated this narrative by saying that it was one of the most significant experiences of her life. She also mentioned it in the opening moments of the interview.
One of the results of the burn was that Celiwe was greatly physically disfigured. She also said that she was able to deal with the burn much better when her epilepsy stopped, as she often felt like she was at risk of being burnt again if she had a fit near a hot surface. With regard to her stay in Hospital, she said ‘I remember my nurses and my doctor, he was a nice guy. When he arrived in the morning he would ask, where is Celiwe? No, I was feel like he was my parent also, because I was still young and I was the only one that was young in the ward. So I feel that I got special attention’. In relation to her making sense of her experience, she said that becoming a Christian helped her greatly. She believed that it was all part of God’s plan, that she got burnt, and that she learnt a lot of lessons about herself and the world as a result of her burning, that she would not have learnt otherwise.

The tone of this narrative was one of sadness. Although she said her story about the burning was easy to share, and this was recounted with little emotion, she would often say ‘it was too terrible, so terrible’.

**The disfigurement**
Apart from the burning itself, Celiwe spoke about the resultant scarring and the disability as being a very important part of her life. She orientated the narrative by saying that immediately after the burn she had to deal with the scars, even when she was still in bandages. The characters of this narrative were the children in her community when she was growing up, men that had shown romantic interest in her and the community where she lived.

The complications of this narrative started shortly after Celiwe was burnt. She said ‘after I get burnt, the children around me, I did suffer from that, because I had few friends...So, when I got burned, my friends run away from me and I was feeling that lonely. Now I am not looking like every child, you see. So I started feeling myself, down... Being excluded...one of the most terrible things was being excluded...Feeling separate from everyone, it was terrible, because I was still young’. She also said that it was difficult when she and the other children at school had to shower together and that
she would always make excuses to shower on her own. She explained that ‘Before I wanted to enter in Miss Eastern Cape, a beauty contest, but then I realised that because of the way that I look, I can’t be in it. So that at school, they told me no, you can’t do that. But I said, because I have a nice structure, I can...maybe it was because of my face, because the other girls who were participating were not beautiful, and compared to them, me, I am much better. So why not? So it was affecting me really to not be able to do the other things that I want to do in my life, because of being burnt. So socially, I was very affected’. Celiwe said that because she was burnt, she thought that she would probably have to marry the first guy that came her way. Furthermore, if she found a boyfriend and he broke up with her, she thought that it would not be appropriate to ask why; as it might be that he was being ridiculed by his friends for being with a burnt woman. She said that this would be too embarrassing to discuss. Another complication was that she explained that in her community it was assumed that because she was burnt she would drink very heavily and be ‘cheeky’, as this is what other burn survivors had done in her community in the past.

In evaluating this narrative, she explained that she had to deal with her disfigurement and the way that people react to her scars everyday, and that it had changed the way that she interacted with people. Consequently, this narrative was evaluated to have great importance in Celiwe’s life.

In resolution to her difficulties at school, she said that she went to the headmaster and her teachers and told them about her difficulties and that they helped her to address the issues by talking to the whole school about Celiwe’s difficulties. She said ‘But, at the end some friends took me as sisters, and I was lucky to have them. Life was normal...I felt like any normal person. And there were problems, but any normal person would also have problems’. Another resolution she made concerning her disfigurement was her turn to her religious beliefs. She explained that because she believed in God, she did not have to worry about boyfriends at this point in her life, as she devoted herself completely to her relationship with God and the Church. She thus avoided the difficulties associated with romantic relationships. With regard to the assumptions that her community had about how she would behave as result of her being burnt, she said that
she purposefully did not drink a lot and that she tried never to be cheeky to anyone. Celiwe said that after doing this, some of the members of her community came to her and said that it was really nice that she did not drink a lot.

The tone of this narrative was pessimistic in nature as it reflected the frustration and hurt that Celiwe had to endure as a result of her disfigurement. Celiwe seemed quite angry that people had reacted to her in the way that they had.

**Education and work**

Celiwe orientated this narrative by referring to the time before she was burnt, as well as after she was burnt. The characters in this narrative were some of her school friends, and her family.

One of the complications of this narrative was that Celiwe came from a family where not many of the members were employed and that due to this, she had always felt like she must make an effort to make money. In addition to this, Celiwe was concerned that as a result of the damage that the burn had inflicted on her body, she would have to find an alternative mode of making money other than doing what she and her family had always assumed that she would do for work (i.e. be a domestic worker).

In evaluating this narrative, Celiwe often said that education was ‘the most important thing to think about’, and said that if she met someone that had just been burnt, she would say to them that they must focus on becoming educated, as this will make their quality of life much better.

In resolution, she explained that ‘I am no longer that person that I was before. I told myself, I have to be educated because I don’t want to work hard now. Because my body is like this. So I wanted to be educated, so that I could at least use the pen to write, so that is what I can say is the way that I was totally changed. So I told myself, I just want to pass Grade 12. I always thought that I was going to be a domestic worker, but after the burn, I told myself no, I must now maybe be a policeman, or a teacher, whatever. Anything that can be easily accessible. I want to be something…so I said I will be a
nurse and then I will see what happens. So it was a complete change from wanting to be a domestic worker to being a nurse. I have to be educated so that I can look after the ones that look after me’. At the time of the interview, Celiwe was studying to be a nurse, and she said that she was really enjoying it, and believed that her future with regard to work was very hopeful.

The tone of this narrative was very optimistic, as it reflected Celiwe’s hard work and determination in order to deal with herself being burnt, and that this had allowed her to do something that had bettered her quality of life.

**Core Narrative**

The core narrative of Celwe’s interview was that her burn injury and the consequences thereof existed in a context where she already had some substantial difficulties (viz. epilepsy and financial concerns). However, she stated that the burning experience as well as the disfigurement had greatly changed her life and consequently, her life narrative (especially in terms of her relationships). Despite this, she managed to find ways of dealing with this (turning to religion for answers and focussing on attainable goals in her education/work) and this had helped her to deal with her difficulties as a burn survivor in South Africa.
Case VII  Sipho

Context
Sipho was a 28 year old black man who lived with his cousin in an informal settlement in Somerset West. He had a Grade 12 education and was, at the time of the interview, working at Woolworths in Somerset West as a packer. He was visibly scarred all over his face, scalp, neck, and hands. His ears had also been burnt off. He was eager to participate in the interview and spoke confidently in English throughout, even though Xhosa was his first language.

The Burning
Sipho orientated this narrative by saying that he was five years old when he was burnt. He identified the characters in this narrative as being some of the friends that he had when he was younger, a man that helped him when he was burnt, the hospital staff and his family.

Sipho explained the complication of his burn in this way: 'As I was growing up, at the age of five years, we were playing with an old car, and there were some other guys with us, I think that they were maybe 12-13-1S...as the guys were growing up they were starting to smoke, to smoke, and I was with them. So the one guy light a match and put it in the petrol tank, and said I must look there, because I didn’t realise what could happen. So I looked there, and the petrol tank was close to my face. Then that was how I was burnt. Then, as I was born here in Somerset West, uh, the ambulance take me to Cape Town. There I stay for three years, in hospital, and then I came back, after three years. In addition to this, Sipho explained that while he was in hospital, the treatments that he received were very painful for him and it was difficult for him to understand that he needed to go through that pain in order to heal at the age of five. He also said that in those three years, his mother was only able to come and visit him once for about 2 days as his family could not afford to come to the burns unit more regularly.
He evaluated this narrative by saying that it was the most terrible experience of his life and that it had changed him forever. He thus evaluated his burning as being very important in terms of his life narrative.

The results of the burn were that Sipho had been very seriously disfigured by the scars, and that for three years, from the ages of 5-8, he was in hospital recovering from his injuries. With regard to the resolution of Sipho finding it difficult to understand why he had to go through so much pain, he said that as he got older he was able to understand that the painful treatments were necessary and that forming a relationship with hospital staff helped him to deal with his injuries. In relation to his family not visiting him, he said that it was difficult, but he understood that they did not have the money to. He said 'That is just the way it was'.

The tone of this narrative was predominantly pessimistic, as it reflected the hopelessness, pain and difficulty of Sipho’s severe burning in the context of low-socioeconomic status. In the interview he spoke in a monotonous tone about his burning and often had long pauses in his speech.

The Disfigurement
Sipho orientated this narrative by saying that he had to deal with his disfigurement ever since he came out of hospital at the age of 8. The characters of this narrative were his family, the children in his community when he was younger and the people that he encountered in his life.

Sipho explained that ‘what happened in my life is that too many people, uh, didn’t accept me as a human being. Ja, people would think that I am maybe an animal. Like there are some people that don’t know that I know their language, like people may talk like Afrikaans, I heard those people, they think that maybe I don’t understand them, but I understand. Talking about me. I wonder what happened to this, but they don’t call it as a person, they call it something animal...treat them like, even less than an animal, as if it is not a living thing...they call me gorilla, a leprechaun.’ Sipho said that when he got back from the hospital, the children that he used to play with would run away from him
because they were scared of him. He also said in school, whenever he was naughty the teacher would always say 'Oh no, it is you again...the baboon again...everyone, look at this baboon'. Sipho said that this was very difficult to deal with and that there were times when he felt as though life was not worth living. He also explained that his family were not supportive at all towards him, and never gave him words of reassurance and encouragement.

He evaluated this narrative of his life by saying that the way people reacted to him was one of the most significant aspects of his life. He said he had to deal with his scars and the way that people treated him accordingly since the burn, and that this had affected him greatly.

In resolution to these complications, he said that every time someone calls him names, 'it makes me stronger...It makes me become good...if I just had people saying good things to me all the time, I would not understand what life is like'. Sipho stated that there were times when he got angry with people who were malicious towards him, and although he felt like he wanted to hurt them, he said he would never raise a finger to anyone, because 'that would make me weak'. He said 'I will look at that people with bad eyes, trying to scare him, to try and get them to stop saying those things about me. But uh, I don't in the other hand, I can say that I am a soft guy because I can't do something bad to that person, even though I may be angry'. He also said that being a Christian had helped him a lot with regard to how he dealt with his disfigurement. He said 'with God's love I know that I am Ok, no matter what other people say...God say that I must love those that hurt me, and that I try to do'. In relation to his parents not being supportive towards him, he said he just had to be even stronger and in the long run, he felt as though this had made him a 'better person', even though it had been difficult for him.

The tone of this narrative was quite optimistic, as he explained how he managed to deal constructively with his disfigurement. However, it still acknowledged the serious difficulty and repeated traumas that Sipho had to endure as a result of his scars, and the anger that he felt towards those that mocked him.
Work

Sipho orientated this narrative by saying that he had been working ever since he left school, having completed his Grade 12. The characters of this narrative were the people at the various places that he had worked as well as some places where he had applied for work.

Sipho stated that he had always wanted to be a police detective, but was not able to join the force as he had always been rejected due to, what he believed was, the fact that he was burnt. He also said it was very difficult for him to find a job, saying 'I would go to the place for the job with a friend and they would say that they only have space for one, and then take my friend. The next day I would go back with another friend, and they would hire that friend, and not me, again'. Since then, Sipho had had two jobs, one working at a petrol garage and the other as a packer at Woolworths, where he was working at the time of the interview. Sipho explained that 'I get a job and they say no, ok, we will take this guy but this guy won't go and help the customers. This guy will stay here in the back, because of my face'. Another complication was that he said that some of the customers talked in Afrikaans thinking that he would not understand, when in fact he did, and said that the sight of him was 'disgusting'.

Sipho evaluated this narrative with the statement 'my work is very important to me...it is my life', and devoted a lot of time talking about it in the interview.

In terms of the resolutions to the complication of this narrative, Sipho said that he had good relationships with his employers and that this made a big difference. He explained that his employers said to him that he was a very hard worker and this encouraged him. In relation to him not being accepted into the police workforce, he said 'it is obviously not part of God's plan'. With regard to not being able to work with customers, Sipho said that he would go and speak to the manager after working for a few weeks and then ask to be put in the front, and see if it worked, as he liked to work directly with customers. He said, 'There is a friendship between me and my customers. Actually I try my best to build a friendship, like saying hello, how are you? Then that is the way that I
can make some friendship, then the next morning or the next day, the customer will recognise me. And he will greet me first before I greet the customer. So that is the way that I make it. The customers I think are good for me. If they are good with me, then I am also good with the customers'.

The tone of this narrative was predominantly optimistic, as it reflected the pride that Sipho took in working hard and being able to overcome his difficulties in the workplace.

Core Narrative
From the above it seemed as though Sipho had to deal with being burnt and disfigured for most of his life, and this was a very influential aspect of his life narrative. He stated that it was incredibly difficult to deal with other people's reactions to his burns, especially in the context of low socio-economic status and poor support. However, he viewed these difficulties as being opportunities to better himself and took meaning as to why things happen in his life from his Christian beliefs. He spoke about how having positive interactions with people, especially in his work, was very important to him, and that he appreciated being treated in a way that made him believe that others viewed him as a human being and not an animal or something less than an animal.
Chapter V
Discussion

Many similarities as well as some differences were found in comparing the above results with the available literature on the psychological effects of burns, as well as with the literature on trauma and narrative. This chapter will discuss this in further detail.

5.1 Psychological Effects
The above-mentioned results concur with Blakeney & Meyer's (1996) finding that there are long-term physical and psycho-social difficulties for burn survivors. All of the interviewees reported some form of physical effect from the burn. This varied from case to case, with some survivors losing parts of their body (as in Thomas’ case), while others were severely scarred but did not lose any of their bodily functions. Psychosocially, all interviewees reported that a significant factor in understanding and experiencing their social interactions was their scarring, and the adverse reactions from others that they received as a result. Five of the seven interviewees explained that this was mostly the case when they met new people, and that people who had known them for a long time, either before or after the burn, got used to the scarring and said that it ‘faded to the background’.

The results were also in accordance with a study done by Sheridan et al. (2000), where burn survivors stated that they felt a change of identity and experienced social stigmatisation as a result of their burns. The interviewees that experienced a clear negative change in their identity were the two participants that were burnt as adults, where they had a clear recollection and memory of their lives before the burn. They both spoke about how their scars became the most prominent defining characteristic in terms of how other people saw them. Three of the five who were burnt as children however still said that their burns were not as important to them as other aspects of their selves such as their occupations and temperaments, despite the fact that their scars were still a defining characteristic for other people. On the other hand, five of the seven participants said that the change in identity that they experienced was for the better in terms of them seeing themselves as ‘strong’ and resilient as a result of having dealt with their burning and their disfigurement in a constructive way.
Three of the participants mentioned that in their communities there were social stigmas associated with being burnt, as a result of other burn survivors’ behaviour. All three of these participants said that they had actively tried to not fit into these stereotypes, but that people in their communities still assumed certain things about them because they were burnt (for example, that they were 'cheeky'). One of the interviewees said that there were fixed cultural beliefs about being burnt, concurring with findings by Tilley (2004).

The above results were also similar to the findings by Miller et al. (1998) and Yako (2006) in the sense that the functioning of the burn survivor’s caregivers and family was affected. Five of the participants said that their parents blamed themselves, with two of these participants also blaming their parents. The remaining two said that they did not get enough family support particularly from their parents and that this was very difficult for them.

5.2 Trauma and Narrative
In terms of Schank’s (1990) understanding of how narrative is used to make sense of past experience and predict the future, the analysis showed mixed results. In terms of making sense of past experiences, five of the participants said that they were able to talk about their experience and that they often talked about it with their friends and family, even though they sometimes cried because it was so painful. Two of these five were burnt as children and said that what they knew was what they had been told. They found this frustrating as they felt they did not have the full story. They were scared that something had been omitted in the telling of the story to them in order to protect them. The other two participants said that the interview was one of the only times that they had talked about their burning and scarring. The one participant said that he dealt with his burning by not thinking or talking about it. The other participant that did not talk about it often, was burnt in the past two years, and shared her narrative in bits and pieces. This suggests that perhaps time is an important factor in the creation of a narrative around a trauma. All of the participants said that being burnt was a traumatic, unexpected and unusual experience, being considered an exception to
their other life experiences. This was accented in the two cases where the survivors were burnt as adults. However, despite this, all of the participants used their narrative around, or experience of, being burnt as a form of ‘prediction’ or an anticipation of the future. Examples of this were seen when the survivors mentioned their great fear of being burnt again, and in the worry that the survivors who were parents had about their children getting burnt. Other survivors became vigilant in any situation that could potentially end up in someone getting burnt. In addition to this, with the narratives around being scarred, all of the participants seemed to base their understanding of how people might react towards them on how others had reacted to their scars in the past.

In comparing the results with van der Kolk’s (1996) writings in traumatic memory, the correlating findings were that the participant’s recollections of their experiences did seem to have a high emotional valency and were vivid and often explained in great detail. The memories also seemed to have a higher degree of emotional response, as well as a somatic response such as crying, than other everyday memories. On the other hand, the experiences were also able to be called into memory at will in a way that was relatively controlled and not dependent on an unexpected trigger. However, it was noted that Shirley, the participant that had been burnt most recently (in the last two years preceding the interview) reported that she often had a flood of memory when she saw things that reminded her of the experience. Although this was not directly covered with the other participants, it was not mentioned by the other six survivors who had been burnt many years in the past. While this may be due to Shirley experiencing some post-traumatic stress symptoms, this was not specifically covered in this study.

In all of the interviews with the participants it was noted that other people and their relationships with the survivors were central in the complications, evaluations and resolutions of their narratives. This correlates with Jordan’s (1987) notion that the ‘other’ is important in the creation and maintenance of narratives. In terms of Herman’s (1992) notion that trauma makes survivors become socially isolated as a result of them feeling alienated from others, this was true for four of the seven participants after the burn, due to them feeling embarrassed about their scars as well as feeling distressed to the point of not wanting to see much of friends and family. The burn survivors also
reported becoming more socially isolated due to the ridicule that they received as a result of their disfigurement. On the other hand, three of the participants reported that after the incident, there was an increase in social activity due to their communities mobilising in support of them. The major difference between these two social consequences of the burn was based on the context that the person lived in, particularly in relation to family relationships, i.e. the more supportive the family, the less socially isolated the survivor was after the burn.

With regard to Janoff-Bulman’s (1985) theory that trauma damages the survivors’ core assumptions about the world as a safe place and about themselves as good and deserving, there were mixed findings. For many of the survivors that were burnt as young children, it was perhaps not the case that their assumptions about the world and themselves were damaged as their assumptions prior to the burn would not have been formed linguistically or narratively due to their developmental level. However, it seems to have been the case that the change was still felt, but on an emotional level. With regard to the three participants that were burnt when they were older children and adults it seemed as though their assumptions about themselves and the world did change. This was reflected in their behaviour and social interactions after the burn, as seen in the example of Shirley, where she found it very difficult to drive and be in public after the burn because of her change in assumptions about how dangerous the world can be, as well as how she viewed herself as a scarred person. In terms of Tuval-Mashiach et al.’s (2004) research, the findings seemed to correlate with five of the participants, in that they found it difficult to accept that the burn had happened to them. Predominantly, the findings also correlated with Foa & Rothbaum’s (1998) findings around how trauma damages one’s assumptions. As a result of trauma of the disfigurement, four of the seven came to believe that they were more vulnerable than others in terms of social ridicule and difficulties. However with three of these participants they said that even though they may be more vulnerable to difficulties socially, emotionally they felt strengthened by their trauma.

Mscolo et al.’s (1997) understanding of trauma and narrative as being created and maintained at three main levels seemed to be highly pertinent in understanding this
research. All of the participant's experience was affected by the 'societal meanings' level. This was seen in the example of Samantha, with her feelings about the importance in her community of finding a husband and how her scars interfered with this. It was also seen with Celiwe's feeling that her community made certain assumptions about her as a result of her being burnt. In terms of the interpersonal interactions level, the experiences that the participants had with others played a large role in the construction of the narratives of their traumas. For example Thomas spoke of certain people in his recovery process in hospital that he found to be very unhelpful in terms of his healing process. Lastly, in the individual meaning making level, it seemed as though this had also played a part in the construction of the narratives. For example Larry talked about 'inner strength', and Sipho talked about him 'getting strong' on his own, possibly reflecting an internal process that took place in the construction of their narratives.

In terms of Wigren's (1994) view that trauma creates a disruption of the individual's life or grand narrative, the results of this research seemed to conclude that this is the case. With the participants that were burnt as adults, there was a clear split that took place in their narratives in terms of before and after the burning experience. With the other participants, i.e. those that were burnt as children, it was difficult to say that there was a great change as there was little record of the person's narrative/experience prior to the burn. However, because these participants explained that their lives were fundamentally affected by their burn related traumas, it can be assumed that these traumas did in fact represent a disruption of their life narratives. In all cases the burning and the resultant traumas around disfigurement were considered to be important in terms of the participant's life narratives. However, in three of the cases presented, other life issues were seen to be more traumatic. For example, Larry's explained that his distant relationship with his mother and his lack of money when he was growing up was more traumatic and disruptive than the burn. This suggested that it was more traumatic to be burnt, impoverished, and have relationship difficulties, rather than just being burnt, with each additional difficulty compounding the trauma of being burnt. Furthermore, the findings suggested that there were strong links between the severity of the trauma of being burnt/disfigured and poverty, as illustrated with four of the
participants who were from lower socio-economic statuses and the difficulty that they dealt with due to their and their family's diminished access to resources and opportunities.

The most striking finding of this research was that in many cases, the traumas encountered were seen to be positive features of the participant's life narratives. In five of the seven interviews the participants found value in their trauma, seeing it as an opportunity to evaluate their lives in a more positive way. This correlated with the findings in studies done by Niemeyer (2004) and Fosha (2001), where the trauma was seen as a 'turning point' for the betterment of the survivor's life. In line with White & Epston's (1990) suggestion that the narrative of a trauma survivor is not necessarily focussed on the 'victim', but rather on resilience and survival, this was found to be the case in five of the seven participants. For example, Sipho repeatedly stated that people ridiculed him or called him names, and he saw his survival and dealings with these attacks as a sign of strength and resilience. The results also correlated with Linley's (2003) findings that a positive transformation after the trauma may not be the return to the original way of functioning, but instead may facilitate the survivor achieving a higher level of functioning and fulfilment in their life. This was seen in the example of Celiwe, where she said that she felt the need to prioritise and further her education and occupation as a result of the burn.

This positive outcome of the trauma confirmed Janoff-Bulman & McPherson Franz' (1997) findings that previously unrecognised and under-appreciated aspects of the survivor's life or self can be acknowledged through the trauma. Therefore, the trauma is 'honoured' as a pivotal experience that makes the survivor reevaluate his/her beliefs, such that a change in life narrative is oriented towards a more significant and meaningful life (Harvey et al., 2000; Lantz & Lantz, 2001). This was illustrated when four of the participants said that if they were to have their life over again, they would choose to be burnt again as a result of the trauma being such an influential part of their lives.
On the other hand, in all of the interviews these positive changes were always in the context of much difficulty and trauma. Consequently, it seems as though the 'honouring' of the trauma was a defence against the pain of the trauma of being burnt. The participants also used other defences, such as their sense of humour in relation to their difficulties, as well as choosing to focus their life narratives on the wellbeing of loved ones (such as their children) rather than on themselves. Therefore in keeping with narrative theory, these narratives of positive changes and benefits from the trauma, have clearly contributed to the participants creating and maintaining a more positive sense of self in defence against the trauma of being burnt and the acknowledged negative aspects of their experience.

Some findings of this research also correlated with Tedeschi & Calhoun's (1995) descriptions of studies where for trauma survivors, positive changes in the person's sense of self, a deepening and improvement of their relationships with others, and a changed philosophy of life were documented. Positive changes in the survivors' sense of self were seen with Larry. He felt that because of the burn and the scarring, he was making more effort in seeking out experiences that would make him feel good about himself. This was also illustrated with Thomas feeling that after the burn he became more sensitive and empathic. He believed that he was a better person because of this. Positive changes in the relationships in the survivors lives were also reported, for example, Samantha and her relationship with her husband. Positive changes in the survivor's philosophy of life due to the trauma of being burnt and disfigured were seen in four of the seven participants, where they reappraised their difficulties as being a constructive challenge in their lives. In addition to this, for many of the survivors, the sense that they made of their burn and their trauma was based on their religious beliefs, with their belief in God strengthening after the burn.
Chapter VI
Conclusions

6.1 Concluding remarks

From the findings above it is clear that for burn survivors, it is not only the burn that is traumatic, but also the multiple traumas that result from the treatment of the burn, as well as the scarring. Therefore the trauma of being burnt extends into many areas of the survivor’s life, and continues to do so for many years after the burn.

It was found that multiple narratives arose within the interviews. The most common was the experience of the burn, or what they had been told about it. All of the participants said that the physical recovery was a long and painful process. Those that were burnt as children spoke about their school as being difficult because of other children, and in some cases teachers, ridiculing them about their disfigurement. The various relationships that participants had, albeit with family, friends or acquaintances were held to be particularly salient in dealing with the trauma of being burnt. In some cases, these relationships with people close to the survivor were seen to be protective and supportive to the survivor. The occupation of the participants was seen as a central part of the life narratives of the burn survivors with their scars being a large factor in terms of work contexts. The participants that were mothers also mentioned this as being an important part of their lives, with their scars causing some difficulties for their children at various times in their lives.

It was found that the burn and the resultant traumas created a significant disruption in the life narratives of the burn survivors, and that this was very difficult for many of them. This was exacerbated by the ongoing difficulty of the disfigurement. However, it was found in three of the interviews that the burn was not the most traumatic or disruptive event or situation in the burn survivor’s life, and that chronic relationship difficulties and social issues such as poverty compounded and influenced the difficulties that the burn survivors had.

The construction and maintenance of the participants’ trauma narratives took place on three levels. On the first level, the participants made sense of what happened to them in
terms of what was happening in their community or society around them, with their behaviour at times being dictated by their belief in what was culturally appropriate. On the second level, the interpersonal interactions/relationships that the survivor had with others in his/her life were found to be instrumental in the construction and maintenance of his/her life narratives. Lastly, their personal meaning making was also found to be important in terms of the survivor dealing with his/her societal values and interpersonal interactions, as well as with his/her own personal challenge of dealing with the traumas.

All of the participants’ experiences of being burnt were considered to be significant disruptions in their life narratives that challenged their assumptions about the world as well as themselves. Although all of the participants reported significant difficulty in dealing with the burning and the resultant traumas, the most striking aspect of the research findings was that most of the survivors dealt with their trauma and defended against their personal difficulties by honouring the traumatic experience of being burnt as a turning point where their lives changed for the better. Four of the participants even said that if they could have their lives over, they would choose to be burnt again as they felt that the burn had moulded them into the people that they are today.

6.2 Strengths and Limitations
One of the difficulties in conducting this research was that there was very little research that had been conducted in this area, with no narrative analysis of South African burn survivors. However, for this reason this study is a contribution in trying to begin to understand the experience of South African burn survivors, especially bearing in mind the high rates of burning incidences in the South African context.

In terms of the sample, while it was useful to use a contained sample that allowed for participants to be found with relevant convenience, it could be criticised for not representing the full spectrum of burn survivors in South Africa. In addition to this, the sample size does not allow for the results to be generalised to other burn populations. This study therefore cannot be considered to be representative of all burn survivors. However it can be used qualitatively to offer an in-depth understanding of the
experience of being burnt for seven South Africans, and begin to describe how this trauma affected their life narratives.

The limitation in comparing the results of this study to other research findings was that there were multiple methodologies across studies. However, for the purposes of this study, it was not possible to use multiple methodologies, and consequently, the findings were compared with this difficulty in mind. Looking more specifically towards the narrative analysis, some of the original expressiveness of the interview may have been lost in the analysis, as a result of the inherent filtering process of reproducing narratives through the eye of the researcher, as well as from fitting the narratives into the structure of the data analysis.

6.3 Future Directions
The available research on adult psychological experiences of being burnt in the South African context is minimal. Therefore it may be useful to examine quantitatively what the specific psychological symptoms after the burn are and how some of these symptoms continue into the adult lives of survivors. It would also be important to practice and study psychological and social interventions such as the World Burn Foundation burn camps in order to test their effectiveness in the psychological treatment of severe burns. While some research has taken place with regard to the effect that a burn may have on a child's caregiver, it would also be useful to study how a burn injury might affect a family functioning as a system.
**Reference List**


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Appendix 1

Informed Consent Form

I understand that this interview is being conducted in order to make up part of a study that is being conducted on burn survivors in South Africa. I have been selected as an interviewee as a result of myself being a burn survivor and voluntarily agree to participate in it.

I understand that all information given in the interview will be strictly confidential and that I will not be identified at any stage in the study. I also understand that I can stop the interview at any point and not continue if I wish.

I am adequately informed about the study that is taking place and voluntarily take part in it.

________________________________________

Signature of participant

________________________________________

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Appendix II

Interview Schedule

1a. I was wondering if we could begin with you telling me a little about yourself? Anything that comes to mind.
1b. Follow up in terms of detail and time periods, following order of narrative.

2a. In your opinion what have been the most significant experiences that you have had in your life?
2b. As with 1b.

3a. Can you perhaps tell me a little about the time when you were burnt?
3b. As with 1b

4a. What do you think has changed in your life since the burn incident?
4b. As with 1b.

5a. In your experience, what are the social stereotypes and stigmas that surround being burnt and how has this affected you?
5b. As with 1b.

6a. If someone had just been burnt what would you say to them about knowing what to expect and how to best deal with the psychological effects of being burnt?
6b. As with 1b.