

Yesterday (2004)

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Summary

Yesterday is a film that transmits great spiritual force, in contrast with the awesome South African landscapes that surround the harsh living conditions of their inhabitants. The social reality of South Africans has been captured in this film by the director and scriptwriter Darrell James Roodt, whose Western point of view evolves around social criticism and awareness. In this part, the director reliably reflects the difficulties faced by South African women, who are represented by the character of *Yesterday*, Beauty's mother. The plot takes place in the country, where women take up the role of both mother and father, since the vast majority of the young men emigrate to cities (in the film, *Yesterday*'s husband goes to find work in Johannesburg) in search of better job opportunities that will allow the family economy to be maintained. Within this context, Darrell James highlights the social, economic and religious features that are characteristic of African societies, so that viewers can understand which factors influence the development of HIV-related illnesses in Third World countries.

The society within which the action develops is one that is stigmatized by HIV as a consequence of the huge social blemish caused by the disease. Thirty-three million people in the world suffer from HIV and this means the death of two million a year, the South African population being one of those most affected by the virus.

Keywords: Africa, AIDS, Third World, stigmatizing disease, health resources.

Technical details

Title: *Yesterday*

Country: South Africa

Year: 2004

Director: Darrell James Roodt

Music: Madale Kunene

Photography: Michael Brierley

Film editor: Avril Beukes

Screenwriter: Darrell James Roodt

Cast: Leleti Khumalo, Lihle Mvelase, Kenneth Kambule, Harriet Lehabe and Camilla Walker.

Color: Color

Runtime: 96 minutes

Genre: Drama

Production Company: Videovision Entertainment

Synopsis: *Yesterday* lives in Rooihoek, a small village in Zululand, South Africa. She must face the difficulties of a precarious daily life alone. She educates her seven-year-old daughter,

Beauty, with courage and joy, while her husband works as a miner in Johannesburg. The fragile balance of *Yesterday*'s life becomes threatened when she is diagnosed as suffering from AIDS. From that moment onwards she has only one concern: to guarantee a decent future for her daughter.

Awards: Nominated for an Oscar Award for Best Foreign Film of 2004 (2005). EIUC Award ("European Inter-University Centre for Human Rights and Democratization") at the Venice Film Festival, 2004.

<http://www.imdb.com/title/tt0419279>

<http://www.yesterdaythemovie.co.za>

Yesterday (2004), by Darrell James Roodt, tells a hard story full of realism set in the harsh conditions of present-day South Africa (Figure 1), ten years after the arrival of democracy. It is the first international film made in the Zulu language. It was funded by the Nelson Mandela Foundation with a view to showing the reality of a country overwhelmed by the number of HIV-infected people and the lack of resources.



Figure 1: Yesterday and Beauty on their way to the clinic

South Africa is one of the most HIV/AIDS-stricken regions in the world. As is the case in a large part of Sub-Saharan Africa, AIDS mainly ravages women, who are three times more likely than men to become infected. The stigma and taboo lead many South Africans to avoid even mentioning AIDS, let alone encouraging them to get tested or seek treatment (Figure 2).



Figure 2: Yesterday and her husband stigmatized by their disease

The film

It is summer in Zululand, South Africa. Yesterday (Leleti Khumalo), a thirty-year-old woman, and her seven-year-old daughter, Beauty (Lihle Mvelase), are on their way to the clinic in the small village of Kromdraai because Yesterday has a persistent cough.

On the way they meet two teachers who have been seeking a job for two years and Yesterday tells them that in her village, Rooihoek, they might find employment but that they have to walk for two hours to get there. When Yesterday and her daughter arrive at the clinic there is a long queue. After waiting all day long under a scorching sun they do not manage to see the doctor so they go back home.

On Tuesday, Yesterday and Beauty return to

the clinic in Kromdraai. In spite of arriving much earlier, it is still too late to see the doctor. On their way back, they come across one of the teachers (Mmoni Moabi), and she tells them that her friend managed to get a job in Rooihoek.

The following morning, when Beauty returns to the shack, she finds Yesterday lying on the floor. Hysterical, Beauty runs off in search of help.

Because of her fainting fit, Yesterday goes to visit the Sangoma, the traditional witch doctor. The Sangoma tells Beauty that she will never be able to help her unless her mother frees herself from her anger, to which Yesterday denies that she is angry.

The teacher, worried about Yesterday, suggests taking a taxi to the clinic. Yesterday thinks that taxis are a waste of money, which is why she prefers to walk. At dawn, the teacher wakes Yesterday up and insists that she take a taxi, telling her that it has already been paid for and that she should not worry about Beauty because she will take care of her.

Yesterday finally manages to see the doctor (Camilla Walker), a white woman who speaks Zulu. After examining her, the doctor asks for her written consent to perform a blood test but Yesterday says that she can neither write nor read. The doctor overlooks the formalities and performs the blood test anyway. Faced with many alarming personal questions asked by the doctor, such as whether she has had sexual contact with anyone other than her husband, whether she uses condoms... Yesterday looks at her with despair. She has realised that, in an implicit way, she has just been diagnosed as suffering from AIDS. The doctor tells her she should contact her husband so that he will get tested too.

After an unsuccessful attempt to speak with her husband on the phone she goes to the gold mine in Johannesburg where her husband John (Kenneth Kambule) works. After she has explained the purpose of her visit, John flies into a rage and beats her mercilessly.

During the long journey back to Rooihoek, a tearful Yesterday recalls the happy moments of her marriage (Figure 3).

Winter arrives. Yesterday still seems fairly healthy and sets about her daily tasks as she always has. When he returns home, she sees that her husband



Figure 3: Yesterday after a brutal beating from her husband

John is in very poor condition, and that evening he tells her that at first he did not want to believe her, but that in the end the disease has prevented him working. Sorry and ashamed, he bursts into tears and Yesterday, heartfelt, comforts him (Figure 4).

At the well, the women of the village whisper about Yesterday's husband, wondering why he has not left his home since his arrival and whether he might be ill.



Figure 4: John ashamed after returning home

When Yesterday goes back to the clinic, the doctor is impressed that she seems so healthy. She says that her strength comes from her wish to see her daughter go to school before she dies. The teacher tells Yesterday that the entire village is saying that her husband has AIDS. Yesterday admits this and says that she too is ill, and she tells her about a woman in another village who was stoned to death by her neighbours for having the virus.

Yesterday goes to the hospital at Tugela Ferry to see if they can attend to John. Despite being much larger than the clinic, there are not enough beds to hold the many patients with AIDS.

A group of neighbours, led by the Sangoma, go to Yesterday's shack. When they arrive, the

Sangoma tells her that her rage is the cause of her illness, but again Yesterday insists that she is not angry.

Determined to solve the problem, Yesterday begins to collect rubbish and scrap to build a new house in an empty field where she can look after her husband (Figure 5). Sadly, Yesterday's efforts soon come to an end when John dies shortly after the move.



Figure 5: Yesterday building a shack for John

It is summer again and the disease is beginning to take its toll on Yesterday. The teacher tells her that when she has passed away she will look after Beauty as if she was her own daughter.

At home, Yesterday gives her daughter the uniform she is to use on her first day of school. In the morning, Beauty goes to school in her new uniform and smiles at her mother happily. Yesterday regards her, smiling with pride. She walks away from the school along a long and dusty path, until she becomes a tiny figure in the distance.

Education as one of society's basic pillars

Education is not granted priority in the policies of the most disadvantaged countries, and the lack of budgets often makes the situation worse. Even when it comes to providing humanitarian aid, this is not one of the NGO's top priority issues. This is reflected in the film when Yesterday, at the clinic, is unable to sign her consent to perform an HIV test because she can neither read nor write (Figure 6). It can also be seen in the film when the teacher tries to explain to the women of the village that John's HIV should not be a problem for them, but they, through ignorance, do not believe her.

Although the schooling rate is currently fairly high in South Africa, hovering at around 88% both for males and females, the net rate of attendance at



Figure 6: Yesterday in unable to sign the consent document

primary school is 80% and the rate of students who remain until the last year of primary school drops 77%^{1,2}. To this should be added overcrowding at the schools, leading to very poor educational quality owing to the lack of resources. All this causes the level of academic achievement in South Africa to be lower than in other even poorer African countries. Since South Africa is increasingly aware that it has favoured access more than cognitive development in the past, and that this tendency has affected the whole system, it is now trying to readjust this imbalance, especially in favour of the African majority³.

Education can play an important part and mitigate the frailty of states promoting economic and social reinstatement and reconstruction. Thus, in the film Yesterday's top priority is to see her daughter on her first day of school before she dies, because she is very aware of the importance education will be for her daughter's personal and professional development when she is no longer there (Figure 7).



Figure 7: Beauty's first day of school

Culture and religion

Despite the fact that the vast majority of South Africans are Christian, there are other minority religions such as traditional African religions, Islam, Hinduism and Judaism, which are present, to

a greater or lesser extent, in the culture of the different peoples. The religious syncretism that prevails in rural areas of South Africa is the product of different colonial periods. Both Christians, to a greater extent, and Muslims, etc... have managed to introduce their creed within the idiosyncrasy of these communities, adapting themselves to the traditional animist religion that currently still plays an important part in these societies.

However, in rural areas, the native black cultures preserve their traditions, in which a large part of the life style of these societies revolves, even today, around faith and spiritual matters, as is reflected in the film when Yesterday goes to visit the Sangoma because she feels unwell (Figure 8). In addition, customs such as polygamy are common, to a large extent further contributing to the spread of HIV virus in the ethnic groups that practice it.



Figure 8: Yesterday visits the Sangoma

The problem of poverty in rural areas

South Africa is characterized by its extremes of wealth and poverty. Among the poor, 95% are of African origin and 75% live in rural areas.

Some of the poorest families in South Africa are headed by a woman; others by a grandmother or a child who, through different means, try to support the younger siblings.

In rural areas, men spend long periods of time away from home looking for a job, which indirectly leads to an increase in promiscuity. There are also a large number of women who are forced to work as prostitutes owing to the lack of opportunities, which further contributes to the spreading of the virus. Indeed, in the film Yesterday gets the virus from her own husband, who had left to work in a gold mine in Johannesburg.

Women's economic dependence and sexist cultural burdens

The poor women from rural South Africa who have HIV and AIDS are discriminated against in their relationships with male partners and within the community due to their gender, their HIV-positive condition and their economic deprivation.

Poverty and unemployment affect women from rural South Africa disproportionately⁴.

They are still the victims of discriminatory attitudes and practices, especially by their male partners, and in the environment they live in there are high levels of sexual and gender-based violence⁴.

Often, many women are unable to protect themselves against HIV because they are afraid of violent reactions if mention of the use of condoms is made.

The life of South African women in the country is marked by persistent violence within their families, in their homes, and in unsafe communities with limited police presence⁴.

The coexistence of two epidemics, HIV and violence against women, has increased the impact of violence on South African women and little girls, both from the physical and the psychological point of view⁴.

Difficulties in accessing medical attention

Despite gradual improvements in the government's response to the HIV epidemic, in South Africa there are five and a half million HIV-positive people, one of the highest figures in the world. The prevalence rate of HIV in adults stands at 18%. Fifty-five per cent of these people are women. South African women under 25 have a 3-4-fold greater likelihood of becoming infected by HIV than men within the same age group.

Effective treatment for HIV and AIDS demands regular visits to hospitals and clinics for the patients to receive treatment and attention. In addition, they need to follow an appropriate daily diet with which to take their medication. Women from rural areas who suffer from HIV and live in conditions of poverty and unemployment face constant difficulties in respect of regular access to appropriate food and often they cannot pay for transport to the health centres that are accredited to provide treatment.

The lack of physical access to treatment centres is equivalent to the denial of access to medical attention services, and the government should take more responsibility when guaranteeing this access⁴.

The situation undergone by Yesterday each time she has to go to the clinic is clearly stated in this sentence. She must walk for hours to get there and, in spite of arriving on time, and as a consequence of the long queues for medical attention, she often leaves without being examined (Figures 9 and 10).



Figure 9: Long queues to see the doctor

Around 350000 people a year die in South Africa from this disease. Taking into account that the number of people who need antiretroviral therapy is approximately 1.7 million and that the estimated number of people a year who receive this therapy is 460.000, the percentage of coverage of retroviral therapy lies at 28% of the total of the infected population. In pregnant HIV-carriers, the coverage of antiretroviral therapy to prevent vertical transmission is estimated at 57%⁵.



Figure 10: After a long wait, Yesterday is turned away and cannot see the doctor

In most countries, the HIV epidemic is related to risk behaviours that expose people to the virus, thus increasing the probability of infection. Information about HIV and the level and frequency of the risk

behaviours related to its transmission are important to both identify and better understand the communities that are at a higher risk of HIV and to assess the changes over time resulting from prevention efforts.

Many prevention programmes are focused on increasing people's awareness of sexual transmission in the hope of overcoming the false ideas that could act as an obstacle for changes towards safer behaviours. The promotion of safe sex is the core of HIV prevention programmes and a step forward in the battle against the HIV pandemic. A change in mentality is also necessary, stressing the fact that the disease, and not the patient, is what must be fought, not only in Third World countries, where this is justified due to educational deficiencies, but also in the Western World.

Although endemic malaria, chronic famine, and many other diseases that kill thousands of people daily in poorer countries do not exist in the First World, HIV is indeed present, and although it might sound harsh and even callous it is thanks to this that new vaccines and antiretroviral treatments to halt the advance of this disease are being researched at world-wide level. However, it is clear that access to these new therapies is much more difficult for countries with limited economic resources.

It is well known that pharmaceutical laboratories are not NGO's but instead private companies eager to generate high profits for investing vast amounts of capital. Let us not therefore be hypocritical, although it is true that medicines should be affordable for everyone; governments of developed countries should invest more in research to be able to help the less fortunate, who in most cases -directly or indirectly- we have contributed to further impoverishing. However, we also issue a warning to the governments of most Third World countries in the sense that the loss of ideals (if they ever had them) and corruption favour inequality and to a large extent hinder great the possibilities of development of these nations.

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