

PARTNERS IN AIDS SERVICE

Newsletter #1

Dear Friends,

Our sojourn to Uganda and the African AIDS epidemic has been revealing, upsetting, inspiring, and confounding. The people we have met have reminded us of why we thought we wanted to come here. Let us introduce you to a few of them.

Regina is coughing, a deep gurgly cough. She is walking down a dirt path leading us and a volunteer home visitor to her home, a mud brick shed with one small dark room. Inside are two beds, and a make shift table. Against the wall leans a 25 kilo bag of corn soya flour given to her through a women's group from the UN World Food Program. There is no evidence of any other food. She is a widow and lives here with her two sons, ages 4 and 6. Her husband died two years ago from AIDS and her in-laws removed her and her children from their home. She is already sick with HIV / AIDS and a liability to her relatives. Her sad face breaks into a wan smile as she welcomes us into her home. She does not ask us about when the "medicine" will arrive. She may not even know that others who live with this disease, but who were fortunate to be born in a wealthy society, have ARV's (antiretroviral medicine) and can hope for a good life. She accepts that she will sicken and die. Many of her friends and relatives have done so and why should her fate be different from theirs? But she does have one burning concern: how will she pay the school fees to keep her two sons in school. She knows that education is the only way out and that the \$34 per year that it costs to go to school is a barrier so high that her children will be impoverished forever. She tells us that once she dies her children will go to live with "JjaJja", grandmother.

The Jjajjas of Africa are some of our new heroes. With an entire generation of working adults dead or dying almost every family relies on the elderly to provide support, comfort, food, and education for the young ones. The pediatric AIDS clinic where Torkin spends some of her time is filled with old grandmothers bringing toddlers to see the doctor. They wait patiently along with a hundred other jjajjas for the opportunity to get medical help for their grandchildren. In the picture that Charles took below you see a mother with her adult son. He is paralyzed and dying. She has buried three other adult children all to AIDS. She has two remaining daughters and is caring for numerous grandchildren.



Maria, aged two sits on Torkin's lap attempting to snuggle in as deeply as possible. She is bright eyed and occasionally has the broadest smile that lights up the day. Her eye infection that was festering last week has mostly cleared up. She was abandoned at birth in the bathroom of a local hospital and brought to the Sannu Babies Home for Orphans. We just give ourselves over to be "hugging machines" once a week trying to pour in love and touch, smiles, and encouragement to a few of the 2 million children that have been orphaned in Uganda by the AIDS epidemic.

When we came to Uganda we anticipated that the ARVs would be “rolling out”, the buzzwords in the AIDS world were all about “scaling up” “capacity building”, “breaking the silence”. We were confounded to find almost no organization actually distributing ARVs. Yes, there are lots of pilot projects and the western universities from the US, Canada, and Europe is all eager to do research projects. But very little is available for the uneducated poverty imprisoned people.

In the Mulago Hospital where Charles is working and training African doctors the clinic is giving out ARVs to approximately 250 individuals. 1,500 others are on the waiting list. Mwanni, a 25 year old widow for 8 years, comes to the clinic on Study Day. She hopes to enroll in the one ARV trial available, which will give her all her meds, her lab tests and her visits to the clinic at no cost. She had a CD4 cell count of 192 which she paid for on her own and which qualified her for screening into the study. At screening her CD4 is 202, still critically low but 2 points over the 200 cut off required for the study. She is turned away and all we can do is refer her to NACWOLA, the woman’s support agency that has enrolled and helped 40,000 women with AIDS in Uganda. They have food, support groups, counseling, and for some job training. She is thrilled for the referral since she had never heard of such a place. In the back of my mind I wonder if she is not fortunate to postpone for a while her ARV therapy. Each day we see more mistakes than successes as the local doctors begin up the learning curve. In a few short months we hope they will be doing it better.

Meanwhile the government of Uganda has 38 million dollars of Global Fund AIDS money that is being held in the Finance Ministry. No one seems to know why this money is not being channeled into care with more of a sense of urgency. Activism as we know it in North America is unknown here. Everyone waits patiently, except us. We bitch about it to ourselves and impotently ask our colleagues “Where’s the money?” Will we learn patience or will we teach activism?

Uganda is a beautiful land filled with natural beauty. We are roused from our sleep at dawn by the earliest calls of birds that serenade our ears, blending with the call to prayer from the nearby mosque. The senses are always stimulated here with sounds of zooming traffic, singing, drumming, babies crying, radios blaring, and street vendors calling out their wares. The sky is a rich blue with five different kinds of eagles and storks flying overhead. Smells of flowers, sweat, garbage, spices waft in the breeze. The people wear colors so beautifully against their ebony skin it is hard not to stare at their beauty. Braids are intricate swirls with beads and bells woven into women’s hair hennaed red at the tips. The old and the new, the traditional and the mono culture of the western world flow together in the streets of Kampala. Business people are using cell phones while peasants plod along with goats. The street stall sells matoke (mashed green bananas) and poshe (steamed corn meal) while the well to do can eat Thai or Italian, Ethiopian or French cuisine.

We are “muzungos”, white people who have historically enslaved the Africans, divided and colonized their continent brazenly, extracted their wealth. And yet they are still broadly smiling their welcome to us, willing to work with us, to invite us to their celebrations, to treat us with brotherhood. We feel deeply grateful to be here to receive trust and friendship, the opportunity to serve and learn. At the end of the day we are filled up and emptied out...in a deeply satisfying way.

Which has led us to our decision to stay here committing to work for the next year. More on that in the next letter from Africa.....lots of love to each of you. Our friends back home mean a lot to us now and we appreciate you love and prayers.

Charles and Torkin