Their Own Private Africa

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Don't be fooled. AIDS is not witchcraft. AIDS is real. So reads a poster in the waiting room at the Kenya AIDS Society, housed in a nondescript building off a dusty roundabout in the outskirts of Nairobi. Founder Joe Muriuki declares: "Today in Kenya, if you're not infected, you're affected. Every family group[is experiencing HIV directly. I just lost three young nieces to the virus, and their mother didn't tell me because she was too ashamed of the stigma."

At this moment in Kenya, one in seven of its 29 million are HIV positive. By the year 2000, the forecast is one in every four.

National headlines are filled with ominous warnings: "111 Kenyans die each day of AIDS," "Half million AIDS orphans by year 2000," "Hospital beds full to capacity with HIV-infected." The problem has recently become an admitted national crisis. No end in sight.

Experts say the trouble lies in Kenya's deeply rooted tribal customs. Male tradition lays down reproduction as a right; most refuse to wear condoms. A woman's status is determined by how many children she bears, regardless of HIV status. Circumcision at puberty – a cultural rite into sexual maturity – liberates teens into wold of unsafe sex. Wife sharing, polygamy and general promiscuity all contribute to the spread of HIV. In a county where superstition and witchcraft are believed by many to be forces behind all good and evil, facts and statistics mean little – and, as everywhere, behavior change is slow to catch on.

Yet there is a group of Kenyan PWAs whose voice breaks faith with the fatalistic Swahili phrase Shauri a Mungu, "It's the problem of God." I met them at AIDS centers throughout Nairobi; they are counselors, educators and home-base workers tackling the problem of HIV in Kenya head-on.

Bright souls in a darkened land, they come from every tribe and walk of life. Their mission is to stop the spread of Ukimwi, Swahili for HIV. They travel for miles by foot and bus every day to educate and care for others. "We teach each other how to live positively," explains one counselor. "Going public made my life more difficult, but I get my strength from being able to help." Quick to share, appreciate and laugh, their own fraternity is sole salve and therapy. "It is possible to be happy with HIV in Africa," adds another counselor, but he readily admits, "Without the comfort we find with each other, many of us would not be alive today."

They do not know what vital load is and can only dream of protease inhibitors. Most have lost their original jobs to discrimination; they barely survive on the centers' pay of a dollar a day. Fortified

by self-acceptance only, they seek to “just get on with life.” Many have energy without regular nutrition, and hope without adequate medication. They tell me their strength comes from compassion, their peace from sharing truth in a world full of fear, and their joy with these personal thoughts and moments… their private own triumph over HIV in Africa each day. Here are their voices.

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