

Orphanage offers hope to HIV-infected children in Kenya

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Baylor University students Anna Galt (left) and Rachel Mejorda join in activities with a circle of Kenyan children.

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From the guarded entryway to the diagnostic laboratory, the HIV-positive children of the Nyumbani orphanage outside Nairobi, Kenya, enjoy privileges millions who share their diagnosis do not. They have more toys

than their dorm mothers know what to do with, and singing and dancing fill their Sunday morning worship services.

Even so, with each passing day, AIDS takes a tighter hold on their lives.

Angelo D'Agostino, a Korean War physician and surgeon turned Catholic priest, began the orphanage in 1992 after finding HIV-positive children abandoned in a hospital while he coordinated refugee relief in Kenya for the Jesuits.

Since then, his efforts have grown to include an outreach program called Lea Toto for children in Nairobi's western slums. A village to house 1,300 orphans and their caregivers is being built well outside the city.

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"People come here to see how it's done," volunteer Kate Fletcher, a retired

teacher from the United States, told a group of visiting Baylor University students.

Fletcher described D'Agostino as "the Bill Gates of orphanages," who can raise \$20,000 in a single college campus visit, funds vital to the orphanage's \$15,000 to \$20,000 monthly budget.

He sometimes inspires more volunteers than they can use. A donor from the United States even constructed a separate dormitory to accommodate volunteer overflow.

Nyumbani, coming from the Swahili word for "home" and officially registered as Children of God Relief Institute, has been no stranger to publicity.

"We're very open," Fletcher explained. "Our website (www.nyumbani.org) is very well-done and inviting."

During a single weekend, college groups from Texas, South Carolina and Pennsylvania, ambassadors from Turkey and Italy, and an Australian documentary film crew visited the orphanage.

Children grow accustomed to such visitors and take them by the hand to give them a tour of the facility moments after they meet.

"It's deep, deep, deep, and there's water under there," 15-year-old Martin Muchene said with his ear to the rumbling top of a well he was showing off.

Muchene seemed like a natural at giving tours of the facilities. He took his time in the fields especially, explaining how avocados would ripen, pointing out patches of corn and lettuce and explaining the differences in leaf shapes and smells.

But when a visitor asked him his age, he stopped. His smile faded, and he stared at the ground. Muchene is HIV-positive and saw another child die

from complications of AIDS less than a week before.

Dealing with death has been a fact of life for these children.

“Sammy wasn’t feeling well,” Fletcher explained. She said the 6-year-old boy “sat in the sun playing with baby Isaac” before Sammy turned “cold to the touch.” One of the nurses later called for her to tell her Sammy was dying. Before the day was out, he was dead.

Fletcher said she had seen five children die in the two years she had been there.

“In the early years, we would have a death every month,” Protus Lumiti, Nyumbani’s chief manager, told the Turkish ambassador, who was visiting for the first time.

But the outlook has improved. Baby Isaac, Sammy’s playmate, has given hope to many of the children, because he had a negative HIV test recently, switching diagnosis like 70 percent of children born with HIV will when their bodies are old enough to flush out their parents’ antibodies with their own. Negative status means Isaac is eligible for adoption, Fletcher said.

With anti-retroviral therapy, recently provided for free through USAID, children have prolonged their life further than anyone ever thought possible.

Now the hospice’s progress and the children’s longer lives have let staff and volunteers focus on issues like dealing with adolescent hygiene—a challenge they welcome.

D’Agostino has also been expanding Nyumbani’s services in recent years. Its on-site diagnostic laboratory has allowed the staff to provide free HIV tests for the children, while offering medical services to the community to bring in more funds. For example, an HIV confirmatory test costs \$50 and a

full microbiology/parasitology test—examining blood, feces and urine in 12 different examinations—costs about \$32.

In the near term, Nyumbani's community outreach and village programs promise to help thousands of children and families suffering from AIDS.

Yet amid the progress, a reminder of the pain is found in a corner of the property, between the fields and dorm-sided quadrangle where the children live. A small cemetery marks where the dead used to be buried. White crosses amid flowery mounds read:

“Rose Gacheri: 1.9.99 – 10.5.00” and “Camela Kwok: 28.10.95 – 1.1.96”

Recent laws don't allow burial there anymore. But Nyumbani's staff looks to the day when they will not have to bury children at all.

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