

A Miracle Baby

It never ceases to amaze me how your life can shift so suddenly. You wake up one morning, you're 24, you're just a single, white female in an African town through which you ride a *boda-boda* without a Kenyan calling out a marriage proposal. You command attention wherever you go simply because of the color of your skin, and are expected to pay three times the normal price for the same reason. You adjust to using squat-toilets, taking cold, infrequent showers, and being constantly covered with a thin layer of dust. You begin to crave *ugali*, a staple food made from maize, even though you had at first found it to be bland and excessively heavy. You gain weight because each time you enter a home, you are expected to eat, and what awaits you has been prepared with no small amount of oil and animal fat. You try to use what Swahili you have learned, but find the common use of English to be a debilitating crutch. It's a typical *mzungu* experience in Kenya.

Then one morning, you wake up and something – everything? - is different. You are still a single, white, female, 24 year-old volunteer in Kenya, but you awaken to the sound of a very hungry baby crying out for her bottle. You forget to shower and change your clothes because you are more concerned with feeding the baby, making her take medicine, keeping her warm, and pacifying her when she whimpers. You are now being called a 'mama'.

So, family and friends, are you thinking, "Did I miss something? When did Rachelle have a baby?"

Let me tell you how this came about. Anne Dwele, the secretary of the Kisumu Kiwanis Club and one of my closest friends in Kisumu, had attended a funeral in a village called Mariwa, three hours from Kisumu. During this funeral, she saw a very young and very ill teenager, mother to two children. The older child was a relatively healthy girl of about four, and the younger a 10-month old girl, Pamela, so completely malnourished, so seriously neglected that you could see each of her ribs, but not see even a hint of flesh beneath her skin. Baby Pamela had been breast-feeding, but because her young mother was so sick, there was nothing coming out. No one, not even the co-wife of Pamela's father, had bothered to feed her.

Two weeks later, Anne received word that the mother had died, and that the baby was taken in by the grandmother. Anne has the truest heart of a Kiwanian – her whole purpose in life is to "serve the children of the world." So, knowing that the baby was in danger of dying from neglect, she asked the rest of the Kiwanis club to get involved. The club has been providing for orphans in rural areas in different ways, but this was a special case. They looked into the possibility of orphanages and adoption centers for baby Pamela, but didn't see anything promising. And when Anne showed me the photo of the baby – like something out of National Geographic – I felt moved. Because I have my own flat and a small room that I keep empty, I told Anne

and Peter, the president, that I could take the baby in, so long as I could find a house-girl to watch the baby while I am work with WOFAK.

The Kiwanis members felt that this was a viable option. So, Anne and I made two trips this past week to arrange for the baby, a three-hour ride each way. We met with Pamela's grandmother and father, a simple and very poor sugar-cane cutter who could barely even afford the *matatu* fare to meet us in town. In a small, dark, and smoky kiosk, the grandmother brought baby Pamela to us and unfolded the dirty cloths to reveal her skeletal frame. Two thoughts came to mind: 1) It is a miracle that she has not already died, and 2) We are not leaving without her.

The father told us in Luo (the local language) that he and his relatives believed the child to be *chirar* (cursed) as a result of some misconduct from the mother; so instead of giving the baby nutritious food, they were giving her herbs to treat the curse. (Anne and I later discovered that it was the side-effect of these herbs that prevented Pamela from being able to take an IV.) He also told us that, for traditional cultural reasons, he could not let us take the baby permanently, but would allow us to take her for at least one year under our "care and protection."

Three days later, after exhausting, frustrating visits back and forth to the Kenyan Children's Department to clear the custody, after meeting with a group of Pamela's relatives to discuss her situation, after an initial examination in a nearby hospital, we took Pamela back to Kisumu.

We have now had Pamela with us for five days, and the change is already evident. The pneumonia that she had picked up in Mariwa as a result of being left on the dirt floor is quickly subsiding with antibiotics. Although she was less than 7 pounds when we weighed her in, she is eating as if to make up for the last 10 months – frequently and eagerly. While she couldn't even move her head or limbs when we first saw her, she is now cocking her head back and forth, and using her arms to push and pull objects. The doctors and nutritionists whom we have consulted all agree that she is a very, very malnourished baby, but they are confident that with a nutritious diet, she will rise quickly. Tomorrow, we are getting her tested for HIV, but it seems unlikely that she would have lived this long if she actually is positive.

As for me, well, I haven't had much sleep in the last four days, but every minute of seeing this miracle baby improve makes up for a minute of lost sleep. If you could only see the way she looks up at you with these huge eyes, blinking slowly as she falls asleep in your arms...I now have a 22 year-old girl named Eunice living with us and caring for her during the day while I am with WOFAK (and I should add that the Kisumu WOFAK staff have been very supportive of me through this, even more supportive when they saw Pamela with their own eyes). And of course, Anne and the other Kiwanis members are showering baby Pamela with love, affection, and gifts of hand-me-down clothes and baby items.

Pamela really is a miracle baby. There was even another starving infant in Mariwa village that Anne had seen during the funeral, a 6 month-old baby who had already died by the time we got there. So, if you ask me, God has some special plan – maybe even a special parent – in mind for this baby.

Before I left, many of you asked me to tell you how you could help with my work in Kenya. I'd like to ask one – or a few of you – to consider sponsoring Pamela, to help me give this child the start to life that she deserves. I am paying Eunice \$15 (U.S.) a month as pocket money for helping with Pamela, in addition to feeding and sheltering Eunice at my flat. Then the formula, food, medicine and supplies for Pamela cost about \$25 a month. So, if anyone is willing to chip in, even \$5 a month, that will help a great deal. Just email me if you are willing, and I will give you my bank account information (I can make withdrawals from my BOA account without any fees).

In a year, Anne and I will re-visit the agreement of custody with Pamela's father, and discuss further options. Anne believes that he will probably be more receptive to the idea of adoption after such a time, and if he is in agreement, then we will actively seek out adoptive parents or notify the adoption agencies.

So, despite the fact that there is a wealth of other uplifting news concerning WOFAK, Kiwanis and our orphan support progress, I will leave you with this for now and, of course, continue to keep you apprised of Pamela's progress. I am praying that God will give me all the patience and love needed to care for her properly.

Much love to you all,
Rachelle 'Adhis'