I KNOW HOW FORTUNATE I AM

To all the women who’ve lost their

lives giving birth

**IT IS A** fact that we have a high maternal

mortality rate. For many Kenyan women,

there is no guarantee that once you go

into the delivery room, you will walk out

alive.

This thought was always at the top of

my mind during the four times I went

into the delivery room, even though I did

not allow fear to paralyse me.

I have had several miscarriages that

have left me with unseen scars, which

I have yet to come to terms with. Many

mothers-to-be already have names for

their unborn babies — I know I did. I am

a Christian. I am pro-life. I believe, like

my Bible says, that God knows us when

we are still inside our mothers’ wombs.

My miscarriages were not mere statistics;

they were babies who had names.

For many women living with HIV, giving

birth can be, if all caution is thrown to

the wind, a matter of life and death.

That is why I cannot emphasise enough

that you should not just plunge into it

headlong because Asunta has done it

four times and come out unscathed.

Remember, you do not just want a

baby: you also want to remain alive and

healthy to love and hold your baby for

as long as possible. For me, that is the

whole essence of motherhood.

**The other side of HIV contraction**

Things going wrong in a labour ward can

negatively affect an entire family. Years

ago, I had a friend who contracted HIV

when she went to give birth.

She was being attended by nursing

students. Believe it or not, they

used surgical instruments that were

contaminated. What she knows is that

she entered that ward HIV-negative, and

came out HIV-positive. And she only

figured this out months later.

“My husband refused to hear my side of

the story and swore that there was more

to it than I was telling him,” she told me

when she came to see me.

“Our baby is HIV-negative and so is his

father — it is hard for me to deal with

this fact.”

This woman — and I know there are

others — had a tough time dealing

with it and accepting her status. Why,

in group therapies where people who

shared how they had been infected

by HIV, most of the experiences had

something to do with sex. She could not

find anyone to relate with.

Speaking of which, another member

who contracted HIV after being raped

also had an emotional roller coaster

while sharing her experience. I think

this is the other side of HIV contraction.

These are stories, often untold, of

people living with HIV who always feel

“innocent”. (In the past, we used to refer

to children living with HIV as “innocents”.

Then we realised that, though we had

the best of intentions, this would infer

that there are persons living with HIV

who are “guilty”, which is not true. So

the “innocent” moniker was struck off

the vocabulary).

**Last-minute jitters**

For me, this time round I would say

everything went well, except at the last

minute. And it came from the leastexpected

quarter. I was scared because

the hospital I was to give birth in was in

the news for all the wrong reasons. The

wife of someone prominent had died

while giving birth there and, if it were up

to me, I would have changed my plans.

But I had done everything there — clinics

and prevention of mother-to-child

transmission.

There was no way I could now take my

file and up and leave. It is not like college

credits that can be transferred. I would

have to do a raft of tests, which would

take time and money. And which my

doctor politely told me was impossible.

I delivered at this hospital, and

everything went just fine for me. For this,

I am thankful to God, the doctors, and all

those who whispered prayers for me.

I know that many mothers and babies

do not make it. And I know that I am

fortunate because, even in the best

hands in the world, things can go wrong.

My heart goes out to this family who lost

a mother and wife, and to all those other

countless unnamed women who give

their lives to bring forth new lives.

For many women living with HIV, giving

birth can be a matter of life and death if

they fail to take precautions . FILE

CHILD BIRTH

Maternal health in

Kenya

According to a 2010 survey by the

Kenya Service Provision Assessment,

an estimated 56 per cent of pregnant

women deliver at home, most without

assistance from a trained provider.

This is in part responsible for

Kenya’s high maternal mortality rate,

which the Kenya demographic health

Survey, 2009, put at approximately

488 per 100,000 live births, one of

the highest in the world.

According to Dr Lennie Bazira Kyomuhangi,

the country director at the

African Medical Research Foundation,

(AMREF), the mortality toll in

Kenya varies geographically, and can

Be

**This is the diary of Asunta Wagura,**

**a mother of five who tested positive**

**23 years ago. She is the executive**

**director of the Kenya Network of**

**Women with Aids (KENWA).**

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