

## **The African Leper**

I had gone up on deck early on that March morning in 1971 for our ship was entering Cape Town harbour, gateway to southern Africa. As dawn broke the port and city emerged from the mist and sparkled in the sunlight. To my disappointment Table Mountain was covered in cloud. “The tablecloth was down”.

Our little family—a three month old baby son, my wife and I had sailed from Southampton, one of the last voyages of the famous Union Castle line. I was starting a three year contract with The Ministry of Overseas Development in Britain to work as a Medical Officer in Zambia. Determined, apprehensive, inexperienced, we had brought a car with us on the ship and determined to drive the 2,000 miles from Cape Town to Lusaka; we would see Africa as we travelled. Our odyssey, much more exciting than simply flying from Heathrow, made for proper dockside farewells, fourteen days at sea, crossing the equator and then a ten day drive. It was the beginning of our African adventure.

Africa had long held a fascination for me; a pear shaped “dark continent”, there was a new music in her gods, religions, tribes, countries and languages. My knowledge of Africa came out of books; the explorers, missionaries, soldiers, entrepreneurs and writers made for a roll of honour -Livingstone, Schweitzer, Gordon, Rhodes, Kipling, Conrad, and Paton. Africa was a place of tropical diseases, malaria, cholera, typhoid, sleeping sickness, polio, leprosy; poverty, famine, drought, plague, war and death were ever present; here was a new world of traditional healers (witch doctors), superstition, black-magic, sorcery, conflict, and slavery. Politics and power here was a melting pot of colonialism, fledgling democracy, dictatorship and tribalism; the European “scramble for Africa” in the 19<sup>th</sup> century had left ugly scars. It was a place of mercenaries or missionaries, exploitation and corruption or evangelical Christianity. A stone –age culture was uneasily coming to terms with the modern world, and I was in thrall to the romance.

The age of Empire was past; it had left a mixed legacy. Conflict seemed to be everywhere on this continent. There was strict apartheid and rising racial tension in South Africa, Rhodesia (not yet Zimbabwe) had survived its unilateral declaration of independence from Britain but struggled; there was revolution against Portuguese rule in Mozambique; there had been bloody riots and savage reprisals in the Congo and Kenya. A wind of change was blowing across Africa.

Zambia was among the first new African states, born in 1964 from Northern Rhodesia after its own independence struggle with the mother country. We were a new, idealistic generation eager to work with Africans and help them build their countries, educate their peoples and welcome them as equals.

Over the next months we came to understand a little more, be less judgemental and priggish. There were problems with an inefficient and ineffective Department of Health who had no idea what to do with me and eventually suggested I be the doctor at Lusaka airport to vaccinate the odd traveller against smallpox. Surprised I did not relish such an easy assignment I was transferred to the main hospital where I joined three other depressed doctors coping with 500-1,000 people a day. It was a rapid sorting operation-history, examination, investigation could only be perfunctory. Had we come 8,000 miles for this?

We had no government house and spent several uncomfortable months in a government hostel. My salary was not paid. Lusaka was not much to our liking, a civil-service city, old white elite in their clubs and the ex-patriates making their own and separate community- where they mainly moaned about Zambia.

We were saved by making friends with some catholic nuns running St. Luke's Mission Hospital some 120 miles from the capital and presently with no doctor. We went there at weekends and I worked there happily as their sometime doctor. The nuns were kind, practical and their hospital of 100 beds showed what was possible despite limited or even absent government support.

It was the end of a long out-patient session at St. Luke's; I was tired, hungry and thirsty. I noticed a young man in soldier's uniform waiting quietly until everyone had left. Private Naaman was a soldier, stationed 10 miles further east at Luangwa Bridge.

This bridge was of strategic importance for here the three countries Zambia, Rhodesia and Mozambique met. The only road connection between the Central province of Zambia and its Eastern province the bridge was heavily defended with a garrison and artillery. In Mozambique Frelimo fighters were engaged in guerrilla warfare with the Portuguese colonisers and fled back to safe camps in Zambia after incursions. Rhodesia and Zambia were in armed pseudo-truce, there was sporadic fighting in the area of the bridge.

Private Naaman complained of a patch of rough skin on his back which for about a year had been slowly increasing in size and was now about 5cm. in diameter: it did not sweat and when I pricked the patch with a pin he felt nothing. He had been to the traditional healer but without success; he came reluctantly and a little shamefacedly.

These were cardinal signs of leprosy and another member of his family was in a Leprosarium. Leprosy was still quite common in Zambia: afflicted patients were sent away to a Leprosarium, treatment was only just becoming effective and these institutions were gothic horrors where men, women and children lived out their days with faces and limbs ravaged by the disease. Naaman was fearful: if he had the disease his life in society, his army career, his chance of marriage and family might be over.

I took a skin biopsy to get laboratory confirmation; he was entered in the Leprosy register and started on treatment. The news was good, the newer drugs Dapsone and Rifampicin worked. Provided he took his medication and attended regularly he would be cured. He was not infectious; he could continue working as a soldier.

A year or so later we had moved to a large Mission hospital in Eastern Province. St. Francis Hospital was very busy but well run; there was a missionary zeal and a team spirit which gave for a huge sense of pride and commitment. I worked 120 hours a week, learned a good deal and felt that this was the African experience I had hoped for.

It was a hot, hot afternoon and we were returning by car from Lusaka to St. Francis. The 200mile journey took 4-6 hours for much of the road was still dirt. The trip to the capital had been part of a precious holiday; we had stayed there overnight on the way back from a memorable three days at the Victoria Falls. We approached the Luangwa Bridge. You had to drive at no more than 5 mph, you had to produce documentation, your car could be searched, your cases opened or you could just be made to sit in the sun for an hour before being allowed to cross.

The soldiers were bored and trigger happy, they had shot and badly injured a man who had driven too fast across the bridge only a few weeks before. It was an exercise in patience and self-restraint; yet it was another 3-4 hour drive to get to St. Francis and night driving on the dirt road was ill advised. We sat with fixed smiles and to our delight were let through in ten minutes. There were occasional soldiers and road blocks after the bridge but they were uncommon.

We had climbed the hill from the bridge, we felt relief; we should be home by 6pm. Suddenly a soldier leaped from the side of the road. He crouched aggressively, his features distorted in a scowl of hate and anger. He pointed his rifle at us; I heard him release the safety catch; my wife screamed; our little son burst into tears.

I stopped the car and got out, raised my arms and went to talk to the soldier.

Suddenly he threw his rifle down; his face lit into a huge smile; he rushed to embrace me. It was the transfiguration of a man. The soldier was Private Naaman, the leper I had treated those months back. He was joyful, thankful, tearful... He proudly showed me how his skin was healing. I hugged him and he hugged me. Africa, medicine, the care of the common man and woman all immensely worthwhile, and I was a small part of that.

St. Luke the evangelist was a physician too..... and a great story teller

*And one of them, when he saw that he was healed, turned back, and with a loud voice glorified God.*

*And fell down on his face at his feet, giving him thanks: and he was a Samaritan*

*And Jesus answering said, "Were there not ten cleansed? But where are the nine?"*

*There are not found that returned to give glory to God, save this stranger.*

*And he said unto him, Arise, go thy way: thy faith hath made thee whole"*

St. Luke Chapter 17 v 15-19

That day for me the table-cloth came off Table Mountain.