

## FIFTY YEARS IN ZAMBIA



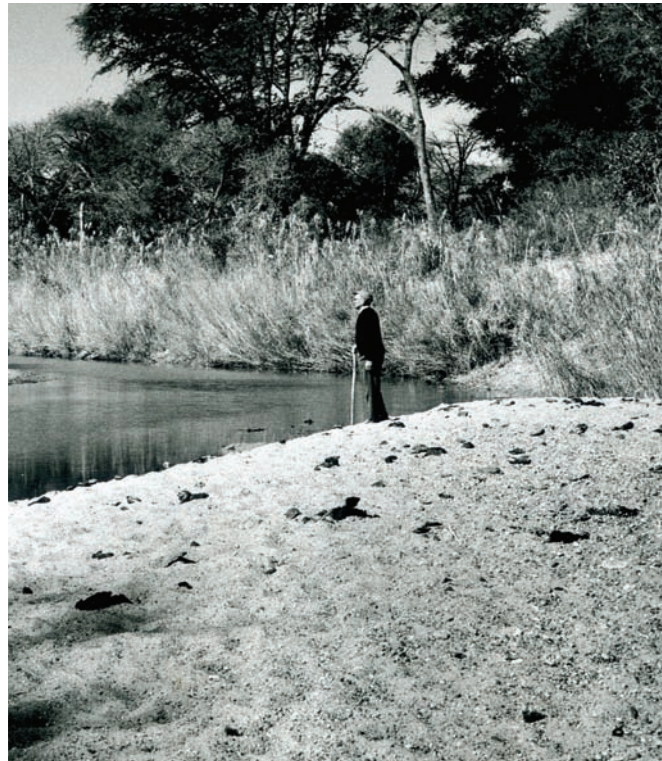
## Fifty years ago

Zambia was then called Northern Rhodesia and only gained independence in 1964.

The massive Kariba Dam built on the River Zambesi, had just been completed.

Most of the country's economy was dependent on the mineral wealth of the copper-belt.

The journey from England to Zambia then took 24 hours. Today it takes just 11.



Most of Zambia lies on a plateau, 4000 feet above sea-level, so although near to the equator, the heat is dry and bearable. However in some of its deep valleys, the temperature can rise to 110 - 120 fahrenheit.

Its best known topographical feature is the Victoria Falls - a spectacular waterfall, 355ft high, which borders Zambia and Zimbabwe.

Zambia has four tribal groups, each with its own language: Ci Chewa, Ci Bemba, Ci Tonga and Silozi.

Politically, over the years they have achieved a high level of peace with relatively few upheavals and, thankfully, no military coups.

The staple diet was 'nshima', a thick maize porridge and a successful maize crop depended on a good rainy season.



## Zambia

The Republic of Zambia is a landlocked country in Southern Africa. The neighbouring countries are the Democratic Republic of the Congo to the north, Tanzania to the north-east, Malawi to the east, Mozambique, Zimbabwe, Botswana, and Namibia to the south, and Angola to the west. The capital city is Lusaka, located in the southeast of the country. The population is concentrated mainly around the capital Lusaka in the south and the copperbelt to the northwest.

Zambia has been inhabited for thousands of years by hunter-gatherers and migrating tribes. After sporadic visits by European explorers starting in the eighteenth century, Zambia was gradually claimed and occupied by the British as protectorate of Northern Rhodesia towards the end of the nineteenth century. On 24 October 1964, the protectorate gained independence with the new name of Zambia, derived from the Zambezi river which flows through the country. After independence, the country moved towards a system of one party rule with Kenneth Kaunda as president. Kaunda dominated Zambian politics until multiparty elections were held in 1991.

Zambia's economy has been traditionally dominated by the copper mining industry, however, the government has recently been pursuing an economic diversification programme. During the 1970s, the country began sliding into a poverty from which it has not recovered. Zambia's total foreign debt before Heavily Indebted Poor Countries (HIPC) completion exceeded \$6 billion in 2000. The average per capita income is 1,150 US dollars (World Bank 2008). About 60 percent of the population is reportedly living on least than 1.25 dollars per day.





**In 2010 the English Province celebrates the fiftieth anniversary of its missionary work in Zambia, once known as Northern Rhodesia. Much has been written about this work of the Brothers and who died there. This is an overview of those years, taken from those records and past interviews, written so that we might thank God for all that was given. This reflection can never adequately encompass all that was done, but serves to acknowledge with gratitude the Brothers' considerable efforts and reflect on lessons learnt.**

The story begins with the original intent, that is, to assist in the opening and operating of the country's only psychiatric hospital and training school at Chainama Hills on the outskirts of Lusaka. It ends with work that fortunately still continues in Zambia's Southern Province in the town of Monze.

Whilst this written reflection is about the Brothers, it has to be emphasised that in Chainama they were but a part of a team, working in collaboration with a community of Sisters - the Franciscan Missionaries of the Divine Motherhood. An excellent religious and working relationship was built up between the Brothers and Sisters and this cordiality and friendship persists to this day. As one Brother put it, "this friendship was sealed on that first Christmas day when they introduced us to baked Alaska and the film Fiddler on the Roof."

In those days the missionary climate, in terms of active works of charity, tended to be dominated by a dictum from one of the bishops, namely, "to get in, get on and get out!" plus a philosophy which ran, "give a man a fish and you feed him for a day – teach a man to fish and you sometimes feed him for a lifetime."

## The works of the Brothers in Zambia:

1. Established the country's first psychiatric hospital.
2. Within Chainama, as medical assistants graduated from the training school and commenced working in psychiatric annexes around the country, the Brothers helped in this extension work by advisory visits and by editing and publishing the 'Chainama Chronicle'.
3. In the nearby shanty town of Kalingalinga, Brother Sebastian offered a mobile clinic.
4. Some hundred miles to the east they started a bush clinic at Mpanshya, which later became a hospital.
5. At the request of the Archbishop of Lusaka they advised on the building and equipping of a new sixty-bed hospital at Woodlands, Lusaka. When it was completed they took over its operation for the first few years.
6. They worked with the Holy Cross Sisters in their mission hospital at Lukulu in the Western Province.
7. Established a twenty-bed rehabilitation centre for children with physical disabilities at Monze, in the Southern Province, which still continues.

Surprisingly, the records show that almost every Brother of the English Province spent some time, whether for long or short periods in Zambia. This is the list:-

Brother Anselm Granelli  
 Brother Bartholomew Battigan  
 Brother Bernard Burke  
 Brother Bonaventure Garrard  
 Brother Casimir Fegan  
 Brother Francis Stevens  
 Brother Gerard Madden  
 Brother Ignatius Halloran  
 Brother Felix O'Neill  
 Brother John of God O'Neill  
 Brother Joseph Carroll  
 Brother Mark Morgan  
 Brother Martin Barry  
 Brother Michael Francis  
 Brother Sebastian Keating  
 Brother Stanislaus Neild

And from the Irish Province:  
 Brother Anthony Malone  
 Brother Raymond Keane

**"Working in the missions brings out the gifts in people."**

## Chainama Hills, Lusaka - Psychiatric Hospital



Brothers Anselm Granelli, Gerard Madden and Joseph Carroll (in white habits): the first group of Brothers to go to Zambia - 15 August 1961 with Brothers Cyril Martin, Wilfrid Benning and Bernard Burke

Some time before the Second World War, the Brothers were asked if they would go out to Northern Rhodesia to open a psychiatric hospital. They indicated their willingness to do this but war broke out and the venture had to be postponed. After the war future approaches were made by the church and state. Many obstacles arose until finally, in 1960, Brother Wilfrid Benning met with the Bishop of Lusaka and government officials. Following that meeting the English Province had a definite undertaking to take on this work. It would be carried out in harmony with a community of Franciscan Sisters. They would also establish a psychiatric training school.

On 15 August 1961, the Feast of the Assumption of Our Lady, Brother Joseph Carroll led the first group of Brothers, Gerard Madden and Anselm Granelli, to the then Northern Rhodesia. Some months later they were joined by Brother Martin Barry and Brother Bartholomew Battigan. Later still Brother Anthony Malone and Brother Raymond Keane came over from the Irish Province for a short spell, then finally Brother Francis Stevens.

Most of the country's economy was dependent on the mineral wealth of the copperbelt. Its best known topographical feature is the Victoria Falls, a spectacular waterfall over three hundred feet high, straddling the borders of Zambia and present day Zimbabwe.

Much of the country lies on a plateau four thousand feet above sea level, so although close to the equator, the heat is dry and bearable. However, in its deep valleys the temperature can rise to one hundred and twenty degrees Fahrenheit.

Zambia is land locked. Its neighbours are the Democratic Republic of Congo to the North, Tanzania to the North-West, Malawi to the East, Mozambique, Zimbabwe and Namibia to the South and Angola to the West. The country has four tribal groups each with its own language Ci Bemba, Ci Chewa, Ci Tunga and Si Lozi. The staple diet was nshima, a thick maize porridge, and a successful maize crop depended on a good rainy season.



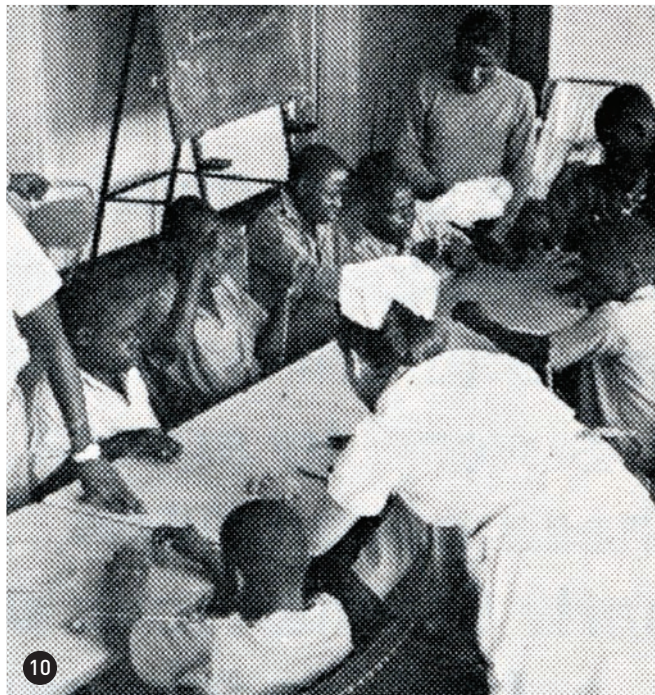
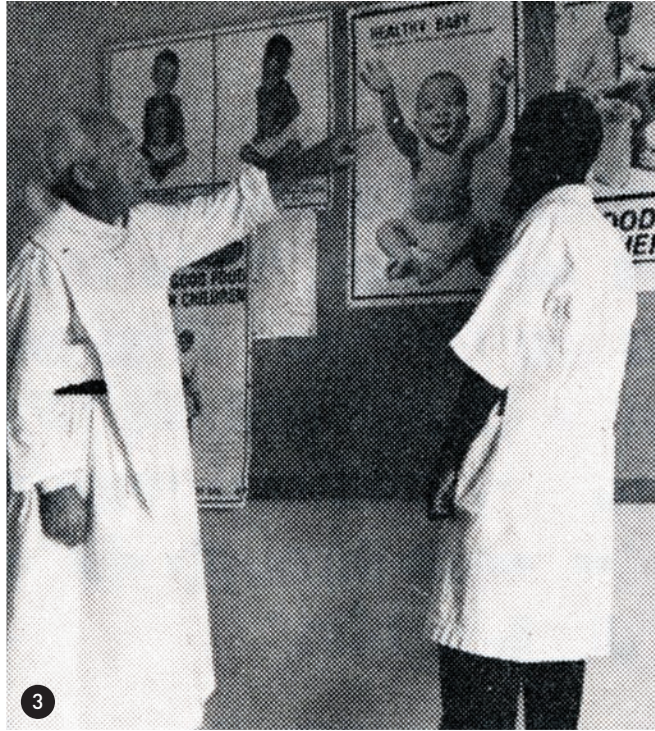
### **Chainama East - extension unit with psychiatric annexes**

This was built by the Brothers for people with mental health illnesses who had committed crimes - a correction centre; two units together for three hundred patients.

It must be remembered that this was the very first hospital of its kind in Northern Rhodesia. The turnover may not appear striking to those at home, but allowance must be made for the tremendous uphill work in organising a hospital of this kind. The grounds of the hospital have become almost show grounds. People come to photograph them.

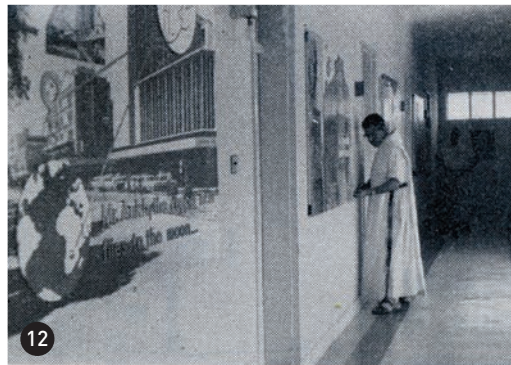
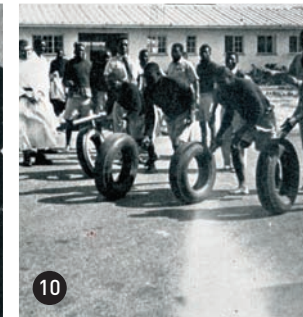
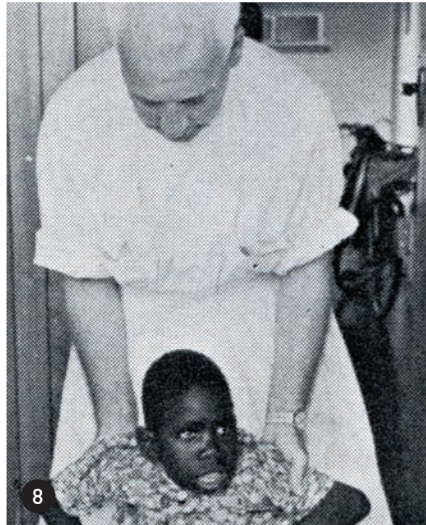
The hospital became a centre of excellence and a centre for other disciplines. For a time it had links with Leeds University.





- 1 Brother Martin Barry leaving the juniorate
- 2 Brothers' Community, Lusaka
- 3 Brother Joe Carroll training staff
- 4 Chapel at Chainama
- 5 Patients at Chainama
- 6 Brothers at Victoria Falls
- 7 Brother Casimir Fegan receiving a supply of eggs from the town mayor
- 8 Brother Joe Carroll treating patients at Chainama
- 9 The Franciscan Sisters of The Divine Motherhood
- 10 Staff and patients at Chainama Hills Hospital





- 1 Brother Bernard Burke food tasting
- 2 Brothers Anselm Granelli and Gerard Madden assessing what needs to be done
- 3 Zambian man
- 4 A Zambian family
- 5 Zambian children
- 6 Brother Martin Barry on his Massy Ferguson tractor - known locally as 'Suzy'
- 7 Patient at Chainama
- 8 Brother Joe Carroll and Zambian child
- 9 Brother Anselm organises draughts tournament
- 10 Brother Anselm Granelli organises games
- 11 Brother Gerrard Madden leaving craft fair where products made at the hospital are sold
- 12 It was generally agreed that Brother Anselm had the best kept ward at Chainama Hills
- 13 Brother Sebastian Keating and Brother Wilfrid Benning



# Chainama Hills, Lusaka - Psychiatric Hospital



## The Hospital

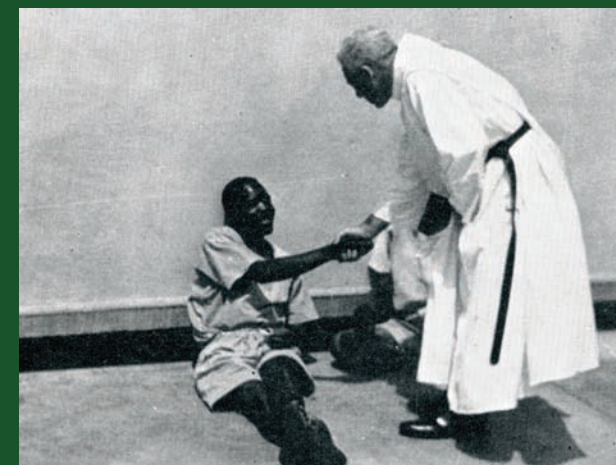
The Brothers were employed and paid by the federal government and so in effect were civil servants. This meant that restrictions and conditions could be imposed.

When the Brothers first arrived in Lusaka the hospital was more than half built. At a stage when, in Europe, psychiatry had taken a great leap forward and there was excited talk of new medicines, therapeutic communities and 'open door' policies, the federation of planners had simply copied the design of a much older hospital built six hundred miles away in Southern Rhodesia. An early visit there left the Brothers unimpressed by the deplorable conditions there, reminiscent of asylum institutions in Victorian days. Intended for sixty people, two hundred were crammed in and there were no attempts to separate people with mental illness from those with learning disabilities. The attitude toward people with mental health illness was one of superstitious fear, which meant consultation with traditional healers (sometimes referred to as witch doctors). The treatment prescribed by the healers was nothing short of barbaric. For instance flogging and chaining to trees was quite common. Driving back overnight from that visit one of the Brothers was picked out by an Anophylene mosquito, female of the species, and so had his first taste of Malaria, within ten days of his arrival in Africa.

**The Brothers appreciated very early into their missionary work that it was essential to learn the language before embarking on any project. Brother Gerard went to Malawi to learn the language – 'Ci Chewa'. Brother Anselm went to the Northern Province to learn 'Ci Bemba'.**

In the interim period whilst awaiting the hospital's completion, Brother Gerard went to Malawi to learn Ci Chewa and Brother Anselm to the Northern Province to learn Ci Bemba; but would Brother Joseph remain in Lusaka 'to be on hand'? This was to advise on some last minute changes to the hospital structure, to make a list of the various medication that would be required, and to formulate a syllabus for a two-year course on psychiatric nursing.

In the event, and after the Archbishop came knocking at the door, the Brother negotiated an agreement to start a bush clinic some one hundred miles to the East in Mpanshya, with the promise to drive back to Chainama weekly 'to be on hand'.



The hospital came partially into operation in the middle of June 1961, and fully in September 1962. The hospital's running policy was worked in conjunction with the Franciscan Sisters who had agreed to operate the section for women. An excellent religious and working relationship was built up between the Brothers and Sisters, and this cordiality is very much in evidence today.

"Our motto was 'Ancient Charity – Modern Methods'. It gave no small amount of satisfaction to see Africans, mostly from bush villages, trained by us nurses, putting into practice what we had taught them, and sharing with us the Christian work of healing broken minds in Zambia." Brother Joseph Carroll

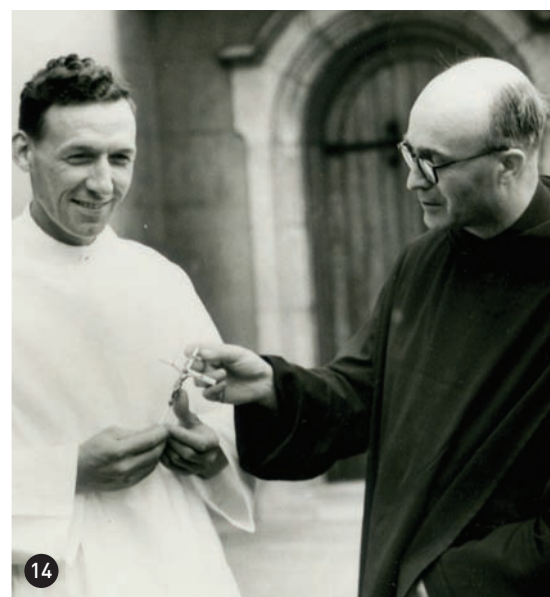
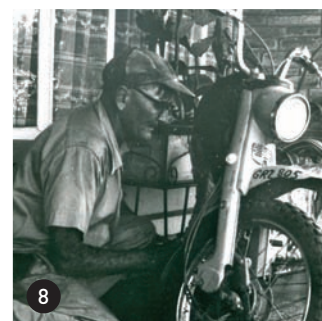
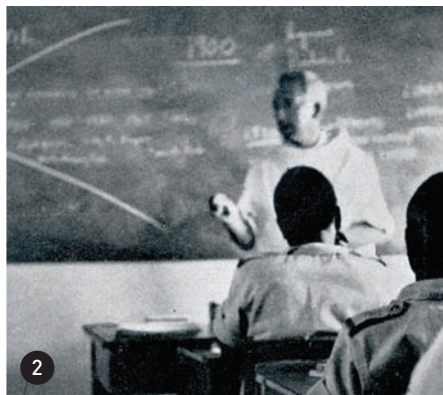
The most common types of mental illness that people were treated for included schizophrenia, personality disorders, epilepsy, learning disabilities and various forms of nervous breakdowns, and other disorders caused by over-indulgence in alcohol and hemp-smoking.

**In an average year over three hundred patients were admitted and treated.**

Many youngsters admitted to the psychiatric hospital were not necessarily suffering from mental health problems, but what we now term as learning disabilities. Confusion over this still exists in many parts of the world. Together with the Sisters, the Brothers organised a place within the grounds of the hospital to cater specially for the needs of children with learning disabilities.



- 1 Brother Joseph Carroll first superior in Zambia
- 2 Brother Joseph Carroll's tutoring role
- 3 Brother Joseph Carroll's return to Zambia in 1991
- 4 "and that smile... in itself a kind of music, which would light up your day" - Brother Joseph Carroll speaking about the people of Zambia
- 5 Brother Anselm Granelli treating child
- 6 Brother Anselm Granelli treating patient
- 7 Brother Martin Barry
- 8 Brother Martin Barry and motorbike
- 9 Brother Joe Carroll and Brother Gerard Madden with Franciscan Sisters
- 10 Hospital gardens 'The Kew Gardens of Zambia'
- 11 Brother Felix O'Neill
- 12 Brothers Anselm Granelli, Cyril Martin and Francis Stevens in their 'white garbs'
- 13 Brother Martin Barry
- 14 Brother Bartholomew Battigan leaving for Lusaka 1962
- 15 Brother Gerard Madden and local children





## ■ By Brother Joe Carroll...



Immediately prior to leaving England, I went to our Irish Brothers' psychiatric hospital in Stillorgan, County Dublin, to take part in an eight-day course which was to be an induction to the new narcoleptic medicines. The participants were psychiatric nurses, male and female, invited from various hospitals from around the county. Listening to their conversation I learnt that the gravest fault within the profession was to have an 'inadequate personality' and the shame of it was that those afflicted got all the top jobs and this because they knew somebody!

We flew to Lusaka on 15 August 1961, the Feast of the Assumption of our Blessed Lady. There was to be a team of five Brothers and five Sisters. My own role was described as the community superior, something called a chief male nurse, and a very unqualified tutor. And this 'wee timorous beastie' just quailed.

### The Community

Today, in this more enlightened age, we long for a community with unheard of openness, ready to share their experience of supporting each other but also ready to challenge each other. Over the years those first four Brothers excelled at the last bit. They were each possessed of very strong opinions! Community meetings could be fractious. But here Timothy Radcliffe has a relevant quote, "One heart and one mind does not mean a seamless unanimity. Debates and arguments are the sign of a church which is always redeemed by the spirit.... a perfect unanimity would be the sign of the immobility of death." So we were a community imperfect but joyfully incomplete. More to the point each of them proved to be incredibly hard working.

Once the hospital was underway there were the inevitable teething problems. Hardly had we opened when that other hospital in Southern Rhodesia referred one hundred and twenty of their patients who were of Northern Rhodesian nationality. The euphemism would be 'long term patients'.

From the word go every patient we admitted was first given a thorough physical examination which often revealed an underlying organic condition - an untreated venereal disease, or brain damage consequent of a lethal combination of malnutrition and over indulgence in a poisonous spirit concoction brewed by the very poor shanty dwellers.

Whilst I do not have the statistics it did seem that the majority of our clients had functional disorders not that dissimilar from their European counterparts, but always with a cultural overlay. In a society which accepted polygamy, the delusion would be more a desperately poor man claiming with unassailable conviction that he had a thousand wives.

The Christian view is always that every person is infinitely worthwhile; that everyone is beautiful in the sight of God. But ours is an uncomprehending world which has lost sight of the value of the human person. Even to this day, there is still so much prejudice. Perhaps, most of us have a little bit of the British National Party in some of our psyche.

Hence you will appreciate that all those years in Zambia, going against prejudice was an uphill struggle. Within the general public, always the fear and negative reaction to any form of mental illness. There were the police who would deliver a new patient in handcuffs, like a criminal, and the trade union that seemed to believe the principle end of a hospital was to provide employment, and, as ever, the indifferent politicians.

### Psychiatric Training

The first approach was to formulate a two-year course in psychiatric nursing for men and women students, until we realised more specifically what would be expected of the men. The shortage of doctors had led the Federal Health Department to formulate the designation of the 'medical assistants'. These were to function as the equivalent of the 'barefoot doctors'. Whilst the Chainama students had the educational equivalent of form two, they would be expected to open and operate psychiatric annexes attached to rural hospitals. Their task would be to diagnose, prescribe and care for people with psychiatric conditions, an awesome responsibility, all of which required a special training programme, and an eventual three-year syllabus.

Later, as the recently qualified graduates took up their posts they found some quite matriarchal matrons who were not extremely supportive. Our graduates needed encouragement. So the Brothers began to visit these annexes with advice and suggestions. We always regretted that such visits could not be made more often.

The other move was to edit, print and publish the 'Chainama Chronicle', a bi-monthly magazine format containing up-dating, answers to questions, a few tips and something extra in the form of gossip, all to alleviate their loneliness and to help them feel in touch.

On a lighter note, one event threatened to bring our world at Chainama to a halt. Our working habit was near ankle length white habits, very photogenic, but once having tired of laundry problems of white garbs trailing in the dust of the ages, I decided to change the colour to a capuchin grey. When the news of this reached England, well, the Earth rocked. The joke of it was that the provincial had just told me, as they do, that as long as I was in charge, he had great peace of mind. Now it seems the poor man had a near apoplectic fit, choking he was, and spluttering "how dare he, the temerity, what right has he?" If I had been present there would have been the dread words of 'off with his head', but finally the Earth settled back on its axis.

There is much more to say but that is covered in the rest of this book. If I am to summarise the Chainama experience it will be to say, they were good years. We were successful in organising therapeutic communities within the hospital. We got results. We taught basket ball, organised football matches, had Jim Reeves singing on the tannoy, and we had some wonderful Sunday liturgies. We danced and sang, and praised God. We had the best fed patients in Zambia. An outside observer described Chainama as a 'centre of excellence'.

*Brother Joseph Carroll*



**Brother Joseph suffered a life threatening illness in 1975 which reduced his body weight by half, leading to a descent into a departure from reality in the form of a depressive psychosis - a condition he once said he so glibly taught his students. (And he still returned to Zambia).**

## Bush Clinic at Mpanshya

In Mpanshya, a hundred miles away from the hospital in Lusaka, the Brothers started a clinic in the Bush, which a little later became a hospital.



### A Brother's Story - A Day at Mpanshya By Brother Gerard Madden, 1962

The morning was pretty much as usual. The same patient queue was waiting outside the clinic after Mass. The 'regulars' already diagnosed. The tuberculosis and endemic diseases waiting for their injections in one group, new arrivals, some gravely ill, some not so bad, in another. Women sat around with their babies on their backs. The men chatted, children played.

Soon everything was underway. All morning the work went on, taking temperatures, testing urines, cleaning and dressing wounds, giving injections, extracting teeth. Burned children (a common occurrence) were soothed and comforted, their parents advised. The undernourished were given vitamins, though in many cases, a few good regular meals would have been a better prescription.

Finally at about noon, the numbers dwindled and the Brother was able to visit the church and say his midday prayers. A meal followed. During dinner there was a commotion outside. "Could Brother go to....." a village several miles in the bush, "where a woman is very sick." Hastily finishing his meal the Brother took up the portable treatment kit, and set off on foot. It was the hottest part of the day, the recognised time for 'mad dogs and Englishmen'. The road was the usual bush track, sometimes a track, sometimes a dried up water course, sometimes overgrown with elephant grass. The river was crossed by a ford – this being a couple of logs wedged into the river banks, and partly submerged. Being outside the rainy season it was possible to cross without having to swim. With a glance to the right and left again, not looking for traffic but possible crocodiles, the Brother took off his shoes and waded through

the muddy water, not without a thought for possible Bilarzia. This is a water borne disease and the scourge of the countryside.

Arriving at the village where almost all are pagan, our traveller found a beer party in progress, with several of the inhabitants already under the influence. In one of the dark huts was a girl, feverish and obviously seriously ill. After doing his best to alleviate the poor sufferer, the Brother sought out the headman. In the meantime, word of his arrival had gone around and he found himself surrounded by demands - a fever, a bad tooth, a tropical ulcer. Eventually he got to the headman and told him that the girl must be brought to the clinic. He asked that the men make a litter, and carry her to Mpanshya, otherwise she must surely die.

Then back on the trek to Mpanshya. It was almost dark when he finally arrived, and in the meantime, more patients awaited him, because of being absent from the afternoon session. Having attended the sick, he had a meal and prepared for the sick girl, meanwhile wondering at the delay. He waited most of the night, but in vain. Nobody came. Either the men could not make the journey, or the beer had proved too potent. This would mean another journey tomorrow, by when it would be probably too late. Could he leave the clinic for a second day, with so many people needing urgent attention for a journey into the bush which might in any case be useless?

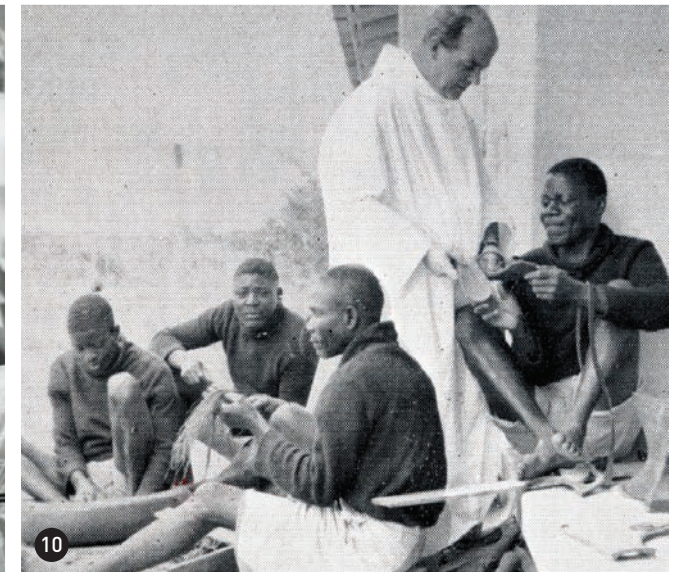
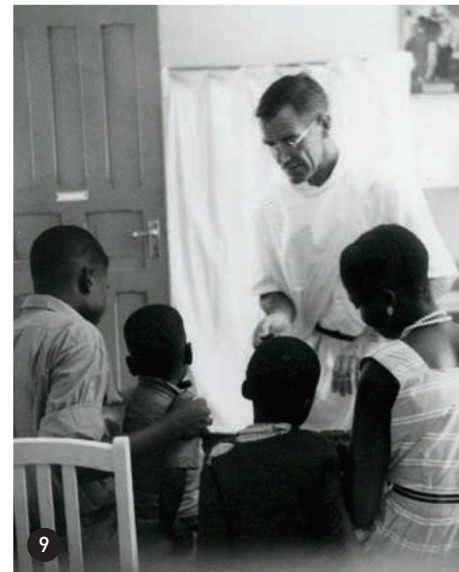
What was the answer? Another Brother, who would be free to tour the surrounding villages. The best answer was transport. An ordinary car or ambulance were useless on those 'roads', but a Land Rover with its four-wheel drive, and high wheel base would get a Brother quickly to most villages and could be fitted out as a mobile clinic ambulance.

Saint John of God Clinic - Mpanshya, Northern Rhodesia Cases treated during the year 1962				
Abdominal	...	...	...	1,125
Malaria and other fevers	...	...	...	1,618
Smallpox	...	...	...	7
Other infectious diseases	...	...	...	555
Pneumonia	...	...	...	855
Tuberculosis	...	...	...	531
Other pulmonary conditions	...	...	...	985
Ulcers and skin diseases	...	...	...	2,117
VD	...	...	...	698
Parasitical	...	...	...	665
Ear, nose and throat	...	...	...	1,209
Dental	...	...	...	359
Injuries and accidents	...	...	...	2,261
Other treatments	...	...	...	363
Total treatments				13,348

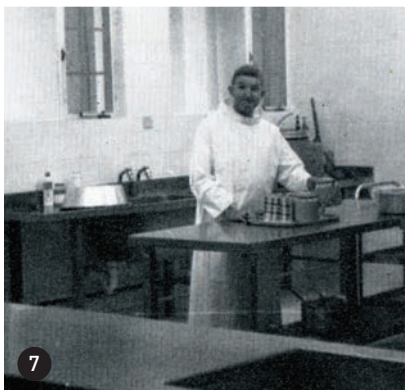
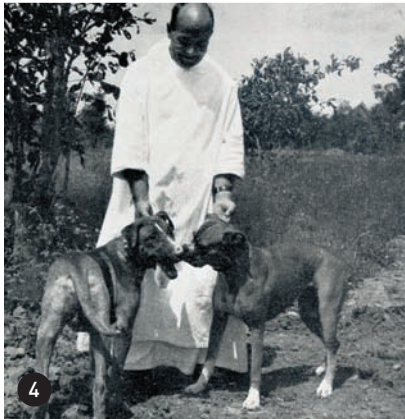
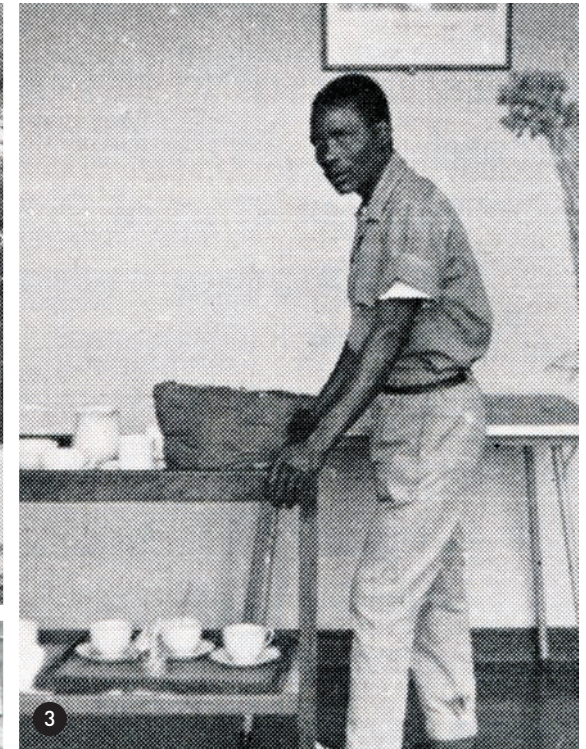
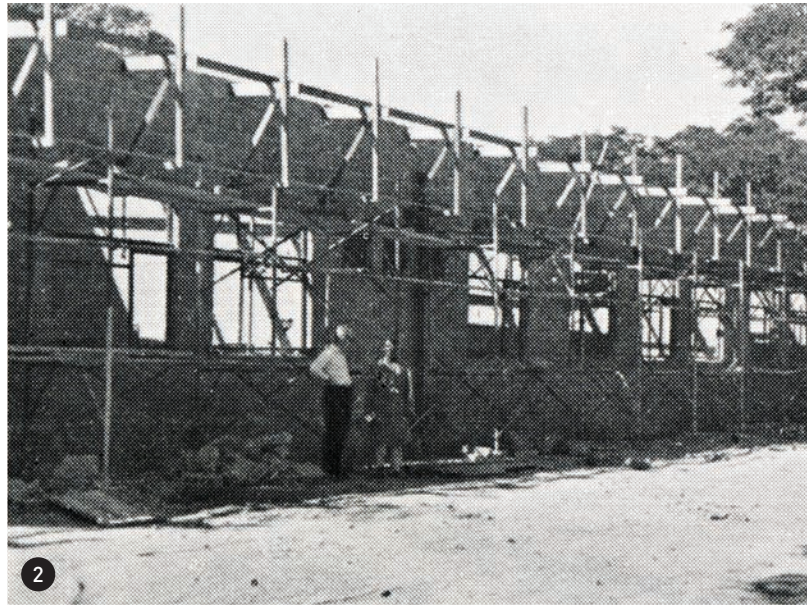
The above is an analysis of the work carried out in a small two-roomed clinic in the bush run by the Brothers about 130 miles from Lusaka. The clinic was staffed by only one Brother at a time.



- 1 Bush clinic at Mpanshya
- 2 Brother Anthony Malone treating a child
- 3 Brother Martin Barry attending event during 'humanism week' in Lusaka
- 4 Brother Gerard Madden with co-workers
- 5 Brother Anthony Malone tending to patient in the clinic
- 6 Brother Martin tending a garden
- 7 Brother Joe Carroll at Mpanshya clinic
- 8 Zambian children grinding maize
- 9 Brother Anthony Malone treating a family
- 10 Brother Gerard Madden with co-workers







- 1 Brother Bernard Burke at Woodlands Hospital, Lusaka
- 2 Building work, Lusaka
- 3 Afternoon tea being served at Woodlands Hospital, Lusaka
- 4 Brother Gerard Madden with dogs
- 5 Brother Gerard Madden using the hospital's floor polisher
- 6 Brother Anselm at event with co-workers in Lusaka
- 7 Brother Sebastian Keating in the kitchen at Woodlands Hospital
- 8 Brother Casimir Fegan meeting patients at Woodlands Hospital
- 9 Brother Anselm Granelli receiving flowers



## Woodlands Hospital, Lusaka - general hospital



Towards the end of the 1960s, the Archbishop of Lusaka asked the Brothers to help an organisation called **Zambian Medical Aid** to open a sixty-bed general hospital in Lusaka. Brother Bernard was first on the scene advising on the design. He also had the task of buying all the equipment from the theatre operating table down to the last towel in the bathrooms. This involved him on trips to South Africa and Germany looking for the best and most suitable buys. When the hospital opened he remained at the helm as the administrator. During those first few years Brother Casimir Fegan was in charge of the operating theatre. Once satisfied that the hospital was successfully established, they handed over to an indigenous staff.

Meanwhile, Brothers Stanislaus and Sebastian came to Zambia and immediately went to Lilongwe in the neighbouring country of Malawi to study Ci-chewa. The language course completed they offered to spend some months in the Mowa mission, deep in the valley, to gain some practise in the language. Mowa was the hottest of all hot spots and the heat at midday intense. There were no doctors and the Brothers said there were some fascinating demands on their nursing skills. Then Brother Stanislaus contracted an alarming combination of hepatitis and malaria and had to return to England.



## Mission Hospital Lukulu - Western Province



There was a large mission on the sandy soil of Lukulu, in the Western Province of Barotseland. The mission lay on the big sweep of the river, a favourite haunt for the crocodiles and some spectacular rainy season sunsets as the river overflowed on to the Barotse plain. The mission hospital and leper settlement was under the care of the Holy Cross Sisters. Here, Brother Ignatius rendered service and put to rights the missions' large and neglected cemetery. Michael Francis became expert in a particular surgical facility and Brother Sebastian demonstrated a gift for hospital administration before losing his life in a tragic road accident.

Brother Martin again put in his 'back-breaking' toil re-laying the whole of the hospital's sewerage system.

**“Brother Bernard worked in the maternity unit. There were quite a lot of babies called Bernard... He had a big input into the equipping the hospital - equipment which he sourced from South Africa and Germany.”**



**Brother Martin Barry**

Brother Martin offered to relay the whole system of drains and sewage pipes. He did this almost single-handed and then required hospital treatment and broad-spectrum antibiotics to repair what he termed as 'bugged innards'.



# Holy Family Rehabilitation Centre, Monze



**In the 1980s it was evident that the large towns and cities in Zambia were well served by a good health service (much of it started by Religious). Outside of the towns, 'the bush' there was little or no provision.**

In 1980 Brothers Bernard and Joseph had withdrawn from Chainama Hills and returned to England. Brother Bernard, seventy at the time, had suffered a detached retina and also had glaucoma, a complaint that would gradually render him blind. However the provincial asked these two Brothers if they would go back to Zambia, this time to Monze, a town in the Southern Province 'to do something about vocations'. On arrival, the Bishop of Monze was asking if they would take on new work, namely a rehabilitation centre for children with physical disabilities. Whilst there was an excellent hospital in Monze run by the Holy Rosary Sisters from Killishandra in Ireland, which provided surgical treatment, there was



no provision for aftercare and physiotherapy following orthopaedic surgery. The Brothers accepted this invitation and the Bishop provided them with a bungalow in St. Kizitos, about eight kilometres from Monze town where they resided for several years whilst they set about finding a piece of land to build the centre.

## Saint Kizitos

With no where to stay the Brothers settled in Saint Kizitos, a mission retreat centre some ten miles off a rutted track out of Monze. As you might expect they were joined immediately by Brother Martin. The accommodation for the Brothers consisted of twenty tiny huts originally built to house catechists in training. As their sleep was being disturbed by bats flying in and out of the hut, Brother Martin made his dwelling bat-proof and then did the same to the remaining huts. After the mission priest was able to procure a number of old railway sleepers, Brother Martin began making simple benches for the out station churches. Before long he had the mission blooming with flowers and his favourite Bougainvillea. In his spare time he made marmalade.

Brother Joseph had long been involved with Zambia's burgeoning charismatic renewal and so was happy to help with the centre's prayer days and life-in-the-spirit seminars.

A Brother's memory to conclude this account of their time in St Kizitos:

**In the area were heavily armed freedom fighters waiting to liberate Southern Rhodesia from the rule of Ian Smith who had declared Unilateral Declaration of Independence (from the British Rule). Three of these freedom fighters, like Nicodemus, came by night, sad to say with nefarious intent. None of our Brothers thought it prudent to argue with guns so they were tied up with ropes. Their eyes on a large safe which Bernard always had transported from place to place, they demanded money. Bernard assured them that there was only a hundred Kwacha in the safe and then added for some reason "anyway, I am not afraid to die." Brother Martin from his bound position on the floor called out, "Bernard speak for yourself." Finally the thieves returned to their theatre of war, leaving our three heroes still roped.**

Fortunately, when being fastened with cords, Brother Joseph, with James Bond like cunning, had tensed his rippling muscles so that when he relaxed them there was some slack in the ropes. Then he wriggled over to Martin whose strong fingers were able to untie the knots.



Charles



Alfred



Jessie



Kemison



Everisto (left) with Robert Chakana

**This centre is still in existence and is run by Hospitaller Brothers.**

## Staffing:

**Charles** - market gardening, outside work "a treasure".

**Alfred** - catering and domestic care of the Brothers' house.

**Jessie, Annie and Linda** and three others - nursing assistants and general chores in the Rehabilitation Centre.

## Non-English Brothers:

**Lawrence** - went to Ireland for the novitiate but left before completing.

**Emmanuel Mutale** - went to Ireland for the novitiate. First Zambian Brother to make profession. Worked in Ireland, England and Africa. Has recently left the Order.

**Kemison Kabanze** - completed nurse training Z.E.N., postulant. Died in 1987.

**Everisto** - Completed Z.E.N. but did not pursue vocation.

**Anthony** - Completed Z.E.N. but did not pursue vocation.

**Robert Chakana** - completed his Z.E.N. Went to Lome for Novitiate. Now a general councillor in Rome.





- 1 Holy Family Rehabilitation Centre, Monze
- 2 Holy Family Rehabilitation Centre, Monze
- 3 Brother Bonaventure Garrard and Brother Mark Morgan
- 4 Patient at Monze
- 5 Brother Bonaventure Garrard with young patient
- 6 Brother Joseph Carroll and patient
- 7 Brother Joe Carroll and patient
- 8 Saint Kizitos
- 9 Brothers and co-workers
- 10 Brother Martin Barry



# Holy Family Rehabilitation Centre, Monze



A large piece of land three kilometres outside of Monze was eventually found and purchased. There was nothing there other than some scrub bushes and a few small trees. Work began on the design, and building commenced using the services of Monze Diocese Building Team. It was the opinion of the some that this was not the best choice as the building took much longer to build than scheduled, and was not of the expected quality..

The initial need for the centre was safe drinking water. Brother Bernard hired a Yugoslavian drilling firm from Lusaka. After drilling unsuccessfully to a great depth they suggested it was time to call it a day, citing the heavy expense. Bernard told them to drill a further three metres and then made a personal visit to the nearby hospital to ask the Sisters for their prayers. On his return, and as he put it, it was 'bingo'. *Even to this day the well has never run dry.* Meanwhile Brother Martin fenced off the whole area to protect his fruit and vegetables from marauding cattle. He also cleared a space on the other side of the fence as a kind of fire wall, because of the fierce fires which could spring up spontaneously in the long grass. His gift of water divining was offered to the missions and farms in the locality where for three years there had been very poor and inadequate rainy seasons leading to absence of surface water and dried up wells.

Four young Zambian men who were interested in the life of a Brother came along to swell the numbers. There was an understanding that they would live with the Brothers and be provided with food and board whilst doing a two-year course of nursing at the Monze mission hospital some three kilometres away. The Brothers would help them with their studies and teach some religious doctrine. Should they qualify as nurses there would be a discernment process if they still wished to become postulants. The reasoning was that even if their application was not accepted, their nursing qualification would still ensure gainful employment.

In the event only Brother Robert Chakana was accepted. He went on to become assistant novice master in Lome, Togo and went on to assume the role as a general councillor in Rome. Mention should be made out to his linguistic abilities: the four tribal languages of Zambia, English, French, Italian and even a Ghanaian dialect.

## The Children...

Initially, the children to be admitted from Monze hospital would first be for rehabilitation following corrective surgery. This was later extended to include children with polio-myelitis, cerebral palsy, osteo-myelitis, spina bifida, congenital disabilities and children suffering from severe burns. The other residents included four young men with spina bifida who would propel themselves in wheelchairs to the nearby secondary school to continue their education. There was also a youngster who had lost a leg to a crocodile.

The medical coverage was supplied by a surgical consultant who flew up from Lusaka in his own plane, and by weekly visits from Doctor Ellen Anderson, the Holy Rosary Sister based at Monze hospital. A local handyman was employed to manufacture and repair splints and callipers and a locally based teacher continued the children's education. As was the tradition, the mothers of the children would often stay at the centre, all making a sizable community.

Brothers Ignatius and Mark also came to Monze for a short spell. This account of the work is grateful to Brother Bonaventure who worked there on two different occasions and supplied much of this information. He tells of the joy in caring for these children with their big smiles and happy dispositions and of their delight at the simple games designed. Always great singers they loved to learn English songs. Especially of the 'He's got the whole world in his hands genre'.

Brother Francis Stevens was responsible for handling finances and shopping in a time of galloping inflation and food shortages, and Brother Casimir volunteered to return to Monze in his retirement, where he later died, and is buried in the Jesuit mission cemetery of Chisekesi.

We are so grateful to our Brothers in Ireland who continue to support the work of the centre. From their last report, and this is wonderful, a volunteer physiotherapist and her horticulturalist husband have brought new life to the project. Her latest move is to teach the mothers there a more specialist care for the children with disabilities. The parents are given new skills and are saved the difficulties of a long journey to Monze. We thank our Brothers across the sea and praise God.

## POLICY

### Admissions

Admissions will be the responsibility of Sister Ellen Anderson, Orthopaedic Consultant at Monze Hospital, or her deputy.

### Medical and Surgical Conditions

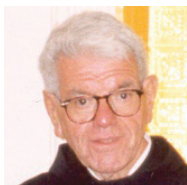
Following surgery at Monze Hospital (3km from the Centre), the patients, predominantly young male and female, will be transferred to the Centre for rehabilitation. The main conditions treated will be of a post-operative corrective nature.

### Rehabilitation

The Centre will be responsible for the post-operative care and rehabilitation, inclusive of physiotherapy and occupational therapy. The centre will also be responsible for the supply and training in the use of sticks, crutches, callipers and limb prostheses.



### **Brother Anselm Granelli (1920 - 2005)**



Was it Saint Anselm who defined theology as 'faith seeking understanding'? It would be appropriate. Anselm was always the man, quiet, good humoured - and ever seeking understanding. He ran a successful therapeutic programme on the half way unit. He also set up a facility in Lusaka on the style of 'alcoholics anonymous'. Of Italian parentage he always wanted to end his days in Rome. He almost did but eventually died in Littlehampton.

### **Brother Felix O'Neill**



Brother Felix O'Neill worked in Chainama Hills and was involved in a potentially fatal traffic accident in Chelston Township, fortunately there was no one seriously hurt. He was also in Monze for a spell.

### **Brother Bartholomew Battigan**



He did a shorter spell in Chainama, but was there in those first, sometimes turbulent years. In an environment which included people of a more manic and potentially violent nature, he was always the calming influence. He was also the community driver. 'Bart' if you would like a testimonial we have you down as 'totally reliable'.

### **Brother Francis Stevens (1926 - 2008)**



Brother Francis, lately deceased, played a less spectacular but totally worthy role in managing the acute admission unit for many years. He had understood the Zambian dictum that a person is only a person in the presence of others. So his presence must be respectfully acknowledged. Francis had one of those remarkable memories that never forgot a face or a name. So, for the inevitable swing-door patient often arriving bruised and bewildered, there was always a warm, smiling and respectful welcome.

### **Brother Martin Barry (1914 - 2002)**



The original contract at Chainama listed the professional qualifications of each of the Brothers and their salaries. At the bottom of the list, almost as an afterthought, there appeared 'farm worker responsible for the grounds'. This Brother was to be Brother Martin Barry. He was given acres of untamed savannah, with its tall elephant grass and a Massey-Ferguson tractor. There followed years of dedicated unremitting toil. Martin was the man 'who would always valiant be', for whom there were never enough hours in a day. This 'grounds man' grew countless tons of fruit and vegetables. He built an ingenious irrigation system which began with a forty foot water tower, fed into a swimming pool, and then gravity fed his crops. He rode a motorbike, he drove a tractor but most of all he drove himself.

**The grounds of the hospital were developed by Brother Martin Barry. They became known as the Kew Gardens of Zambia.**

### **Brother Gerard Madden (1920 - 1978)**



Brother Gerard went to Africa at the age of fifty-two as the occupational therapist charged with setting up an occupational therapy unit in Chainama Hills. The authorities gave him a one off payment of three hundred Kwacha (one hundred and fifty pounds sterling) to purchase equipment. The materials to hand were a number of large wooden packing cases, a dump of old motor car tyres and, growing wildly, a field of a fibre-like plant called sisal. From his department there emerged rubber sandals for a shoeless generation, nylon threads for fishing nets and from the packing cases, large and small wooden stools, and wooden spoons for stirring nshim (maize porridge). The fibre extracted from the sisal was rolled into strong cord forming mats and seating for the stools.

He later found a loop hole in the system. As a government hospital he could import rug wool, duty free. This began a long series of quite beautiful woollen rugs enhanced with a design of cavemen stick figures copied on the visit to the pre-historic caves of Zimbabwe. These were popular with departing ex-patriots who could purchase them at a price. Whilst a purist back home would have hands raised in horror at the thought of an occupational therapy department making a profit, this Brother had no such qualms. This Yorkshire man claimed that if the goods were saleable, the patient's dignity was enhanced and anyway, he needed cash for the clients' comfort fund. A government report included comment on 'a flourishing and productive department'. To his curriculum vitae we could add his practice of being at the local primary school at seven in the morning to teach catechism and the part he played as national secretary of the Saint Vincent De Paul organisation.

He died of a heart attack aged sixty-seven. At his funeral mass, the Archbishop of Lusaka asked his superior to speak. At that time a local politician had caused some amusement in the local press by calling the British Government 'a toothless bulldog'. So the homily proclaimed that Brother Gerard was a toothless bulldog. He got his teeth into his vocation and never let go. Six poor and shabbily dressed men insisted on carrying his coffin.



- 1 Family using local pick up for transport
- 2 Brother Bonaventure Garrard with patient and his family
- 3 Brother Bonaventure Garrard with aspirant Brothers
- 4 Patients with aspirant Brothers
- 5 Patients at the Holy Family Centre with friends
- 6 Zambian family
- 7 Preparing the porridge
- 8 Patients at the Holy Family Centre



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# Holy Family Rehabilitation Centre, Monze



## Brother Bonaventure Garrard

**The following is an account from Brother Bonaventure Garrard:**

The whole area was fenced, a bore hole was drilled for fresh water with the help of Brother Martin Barry and the piping and pumps installed to fill two big silver tanks, which rose like great space ships behind the works. The concrete foundations were laid for the community house, the centre and two bungalows. Electricity was connected from a nearby pylon. The building of the community house began using mud bricks which were mixed and dried in the sun before being cemented into walls and covered with cement. The corrugated roof came in sheets from South Africa, and like most manufactured things, was difficult to obtain. When half the community house was habitable, the Brothers moved in on site. At this time several young Zambian men who were interested in religious life came to stay with the Brothers and helped swell the community numbers. They were instructed by Brother Joseph Carroll and attended the school of nursing at Monze District Hospital.

Brother Martin Barry, whose celebrated agricultural and horticultural skills ensured that both Brothers and patients received adequate nourishment, obtained a huge blue Fordson tractor and started ploughing the land and digging a quarry for laterite to make the roadways. He was ably assisted by Charles, a local man who worked from dawn to dusk alongside Brother Martin. In addition to this hard manual work, Brother Martin also did the cooking and the baking.

Brother Bernard continued sending his 'begging letters' and also made daily trips to the Diocesan Building Team's office to enquire on progress. The following year in 1983, I arrived to experience life and work in the Mission. I had just completed my nurse training and was ready for new horizons. Whilst the centre was being built, I went to St Kizitos to learn the local Ci-Tonga language.

Brother Martin had to return to England for major surgery in 1983, so I had a crash course in bread baking, tractor driving, pumping water, drawing a trailer and growing vegetables. With the help of the Brothers and young Zambian men, all went well indoors, and with the guidance of Charles, things grew outside as well.

In 1984, Brother Ignatius and Brother Mark joined the community. They helped with a new course established at the home craft centre in town, ran by the Mercy Sisters from Meath, Ireland. There they taught carpentry and health care.

A visit from Brother Stanislaus Neild, Provincial of the English Province at the time, accompanied by Brother Michael Francis and Brother George Larkin, found all was going well despite the lack of building on the Centre. I was sent to work in Monze District Hospital and a cook was employed to do my work. The first cook was no good at all and was soon replaced by Alfred, who cooked delicious meals from next to nothing.

Brother Ignatius and Brother Mark returned to England in 1984, and myself in 1985.

The building work moved slowly on towards completion. I returned to Monze in 1986 and in the same year, Brother Bernard and Brother Martin returned to England after a significant part of their religious life dedicated to missions' work.

Six local women were recruited as care assistants and were trained by Brother Joseph and Brother Bonaventure in basic nursing care. I recall some real characters: Jessie, a former barmaid at the New Monze Hotel that had been demolished by a cyclone, Annie a part-time policewoman and Linda, a housewife. They soon adapted to the work and we were very loving and caring to the children. Brother Joseph and myself covered the nursing duties. Sister Ellen Anderson, a Holy Rosary Sister and the orthopaedic surgeon from Monze District Hospital visited once a week.

Finally on 1 April 1986, the Holy Family Rehabilitation Centre opened. Brother Joseph and I went to the hospital to pick up our first two patients, Moses and Betty. Things went well and soon we had five more patients, Phoebe, Brighton, Linda, Lao, Simon and Agnes.

**The Centre housed a physiotherapy department, a workshop for manufacture of appliances and prostheses, a classroom, store room, kitchen, duty room, staff room and a room for four physically disabled children from Monze school. The overall plan submitted included the residential, rehabilitation centre, the community residence cum house of formation and two staff houses.**

As is the custom in Africa, the mother of the child, or another relative, comes to look after the needs of the child whilst in hospital. These women were initially housed in the unfinished ward of the Centre which had no windows or doors, but they appeared quite content.





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- 1 Moses - first patient at Monze 1986
- 2 Collecting water at the water hole
- 3 Brother John O'Neil
- 4 Play time at the Holy Family Centre
- 5 Nina, patient at Holy Family Centre
- 6 Baby receiving treatment
- 7 Sleeping Zambian child
- 8 Making hoe handles





Brother John O'Neill

## Brother John O'Neill

Brother John O'Neill went to Monze in 1986 and stayed there for a year at first working in the Rehabilitation Centre. He returned to Great Britain for a Chapter and was appointed formator and director of services. He took over from Brother Joseph Carroll. Together with Brother Emanuel Mutali and Otto Lillivelt (physiotherapist) they established the community based rehabilitation services in the Monze District (one hundred and twenty-three health centres). They also developed the non-evasive correction of club feet in the new born.

The Chongo service was developed, which was a school for disabled students and the team developed workshop services on site. Many disabled youths were brought back into mainstream secondary education as a result.

In 1995, Brother John went to Mzuzu to work with the Irish Province in the mental health services and the outreach clinic as well as the drop in centre in the town. He conducted a survey that highlighted the need for a children's service, which is still operating today.

After a serious accident, he went back to Our Lady of Mercy Province in 1998 and was appointed to St Joseph's Catholic Hospital, Koforidua, Ghana where he worked in the outpatients department and then as deputy administrator.

He returned to Great Britain in 2006.

## Brother Stanislaus Neild

Brother Stanislaus went to Zambia, along with Brother Sebastian in 1966. He stayed at first in Malawi to learn the language at a hospital run by Missionary Sisters of our Lady of Africa, also known as White Sisters. Unfortunately Stanislaus became ill. He had contracted hepatitis and malaria at the same time.

## Brother Sebastian Keating (1939 - 1978)

Brother Sebastian looked after Brother Stanislaus, whilst at the same time running a mobile clinic in the shanty towns. He lost his life in a tragic accident. He was a great man for fixing things so that they worked properly and was affectionately known as 'Gadgets'.



Brother Stanislaus Neild and Brother Sebastian Keating

**Sadly not all of our Brothers who served in Zambia returned home safely. The graves of Brother Gerard Madden, Brother Sebastian Keating and Brother Casimir Fegan provide a lasting testimony to the commitment of the Brothers of the Province to the extension of the mission of the Order to the people of Africa.**

## Final account from Brother Joseph Carroll

**This brings to a conclusion the account of the Brothers in Zambia and concede that there may be errors in chronological accuracy, for which we apologise. We leave Brother Joseph to make a final comment...**

Sadly, not all stories have happy endings. The story of the Chainama Hills, a great endeavour, has a more sober conclusion. A few years ago a professor of psychiatry from Leeds University was in Lusaka, surveying the medical scene. His report expressed satisfaction at the various medical disciplines, but he also visited Chainama. Here, his observations were depressing. The hospital structure was crumbling and neglected. The care given to the sick left much to be desired, and the local politicians, as ever, seemed completely indifferent. All this you can read on the internet, but let the rivers clap their hands and the hills ring out their joy. During all those years each Brother tried his in his own way to sing the song of the Lord on alien soil. Ours were the attempts to emulate our Holy founder who, like the Old Testament prophets, was given an intense experience of God and a deep sense of unworthiness. Saint John of God lived from his own vision, the vision of Christ who taught that every human being without exception is created in God's image and likeness; that every person is loved equally, eternally, and with such intensity.

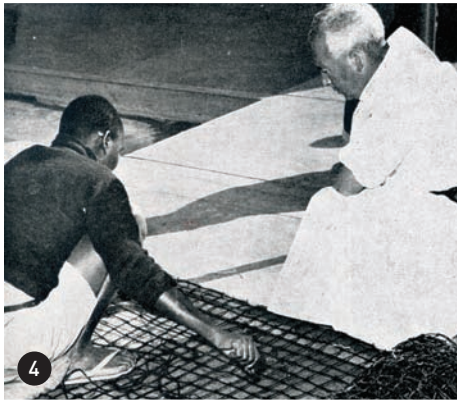
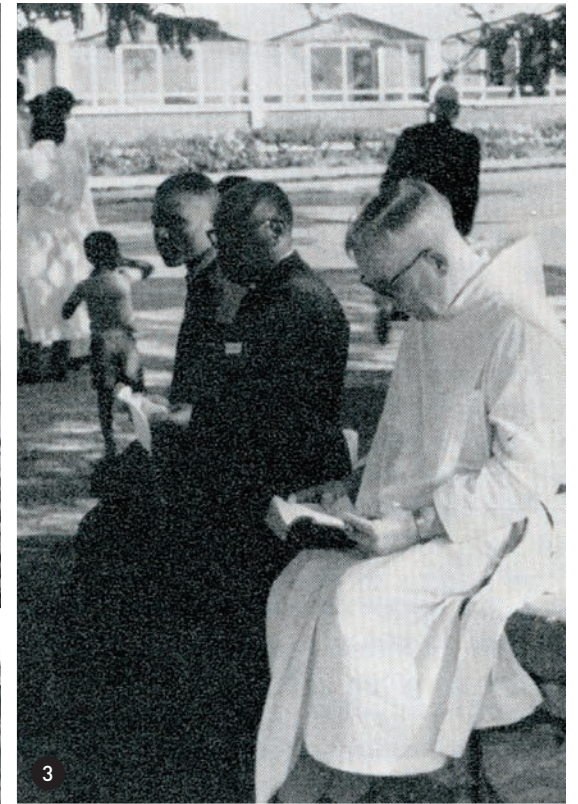
And the lessons learnt? It seems to me that a Brother's vocation begins as a search for God. Then, having barely reached first base so to speak, his calling is to find that Christ our Lord is to be loved and served in the sick, the poor, and the needy, and this will prove to be an absorbing and lifetime task. Then comes the realisation that the source of all our action has to be a growing intimacy with Christ Jesus our Lord. That what counts is not our life but the life of Christ within us.

**Perhaps surprisingly we still sing with Julie Andrews, "Climb every mountain, ford every stream, follow every rainbow, till you find your dream, a dream that will take all the love you can give every day of your life for as long as you live."**

Shortly, we will be happy to re-join our Brothers in Ireland with the creation of a new Province - Province of Saint John of God. We have promises to keep, and miles to go before we sleep!!

*Brother Joseph Carroll*





- 1 Brother Francis Stevens and the Franciscan Sisters with co-workers and patients
- 2 Brother Gerard Madden and school children at Chainama Hills
- 3 Brother Francis Stevens
- 4 Brother Joe Carroll with net maker in Lusaka
- 5 Brothers' community at Lusaka
- 6 Brother Martin Barry and soldiers during 'humanism week'
- 7 Brother Joe Carroll tending to patients at Chainama Hills
- 8 Brother Martin Barry
- 9 Brother Bernard meeting co-workers





Our Province is no longer in a position to make the commitment of manpower to the overseas missions that it once did. We do however endeavour to offer financial support to the work of the Order in developing countries. Such support has never been more necessary. The spectres of poverty, famine and disease continue to stalk the developing country. Africa in particular suffers crises of health and poverty. In Malawi 86 percent of the population live in rural areas with limited access to healthcare. Over 47 percent have access to clean water. Infant, child and maternal mortality rates are at levels which would be unimaginable to the developed world. Ninety percent live below the poverty line. Life expectancy is 35 years compared with 78 years in Western Europe.

Africa has been devastated by the HIV/Aids pandemic. Of the 36 million people worldwide living with HIV/Aids, 25 million are in southern and central Africa. Of the 22 million people worldwide who have died of the disease, 16 million have been Africans. This compares with 14 thousand in Britain and 448 thousand in the United States. So far the pandemic has left 13 million children orphaned. Zambia spends just four pounds per person per year on health and has more than 300 thousand people living with Aids.

An important factor contributing to the spread of Aids is the extreme poverty experienced by a great part of humanity. Our province undertakes to provide at least 25 thousand pounds each year to support the work of the Order in the developing world. If you would like to help us achieve this, please make a donation to the Order.

### **Africa Appeal**

Fundraising and Publications Office  
Hospitaller Order of Saint John of God  
Saint Bede's House, Morton Park Way  
Darlington, Co Durham, DL1 4XZ

*(Please make cheques payable to  
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## FIFTY YEARS IN ZAMBIA



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