FOCUS eye care in Haiti and Nigeria

James E McDonald MD
FOCUS eye care in Haiti and Nigeria
1961-1996+
James E. McDonald, MD

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# Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contents</td>
<td>8</td>
</tr>
<tr>
<td>Table of figures</td>
<td>3</td>
</tr>
<tr>
<td>Forward 1st Edition</td>
<td>4</td>
</tr>
<tr>
<td>Forward 2nd Edition</td>
<td>4</td>
</tr>
<tr>
<td>A brief precis' of Haitian History</td>
<td>8</td>
</tr>
<tr>
<td>Pre story and Planning</td>
<td>11</td>
</tr>
<tr>
<td>A 1948 Caribbean Air Cruise</td>
<td>11</td>
</tr>
<tr>
<td>Thirteen years later the idea Crystalizes</td>
<td>13</td>
</tr>
<tr>
<td>Organizing</td>
<td>20</td>
</tr>
<tr>
<td>The First Month of Actual Eye Care in Port du Paix, Haiti</td>
<td>22</td>
</tr>
<tr>
<td>The Hospital Immaculate Conception and the FOCUS Eye Clinic</td>
<td>25</td>
</tr>
<tr>
<td>Cataracts</td>
<td>30</td>
</tr>
<tr>
<td>The Work in the Eye Clinic and the Operating Room</td>
<td>30</td>
</tr>
<tr>
<td>NEM, Malaria Control and CARE</td>
<td>35</td>
</tr>
<tr>
<td>Walter Nottage</td>
<td>37</td>
</tr>
<tr>
<td>Voodoo</td>
<td>39</td>
</tr>
<tr>
<td>A Voodoo Ritual</td>
<td>39</td>
</tr>
<tr>
<td>Voodoo Joe</td>
<td>39</td>
</tr>
<tr>
<td>Doublement, Telephones and Duvalier</td>
<td>39</td>
</tr>
<tr>
<td>John Nagee</td>
<td>40</td>
</tr>
<tr>
<td>About Witches, Goblins and Devils</td>
<td>41</td>
</tr>
<tr>
<td>Zombies and the Like</td>
<td>42</td>
</tr>
<tr>
<td>The Missionaries</td>
<td>43</td>
</tr>
<tr>
<td>Port du Paix - Bob Gorsich &amp; the Rat</td>
<td>44</td>
</tr>
<tr>
<td>Cap Haitien and the Citadelle and the North Coast</td>
<td>45</td>
</tr>
<tr>
<td>The Rains in Haiti</td>
<td>47</td>
</tr>
<tr>
<td>Port au Prince (Overlap Period)</td>
<td>48</td>
</tr>
<tr>
<td>The Famine</td>
<td>52</td>
</tr>
<tr>
<td>La Tortue</td>
<td>54</td>
</tr>
<tr>
<td>Pere Riou and the French Mission on La Tortue</td>
<td>54</td>
</tr>
<tr>
<td>Death and Burial on La Tortue</td>
<td>57</td>
</tr>
<tr>
<td>The Eyes in the Ground</td>
<td>58</td>
</tr>
<tr>
<td>Returning from La Tortue</td>
<td>59</td>
</tr>
<tr>
<td>An Obstetric Calamity</td>
<td>59</td>
</tr>
<tr>
<td>A Theory of Heredity</td>
<td>60</td>
</tr>
<tr>
<td>Second FOCUS Clinic Les Cayes</td>
<td>61</td>
</tr>
<tr>
<td>Exploring possibilities in Les Cayes</td>
<td>61</td>
</tr>
<tr>
<td>Setting up the Clinic</td>
<td>62</td>
</tr>
<tr>
<td>Max Neptune of Les Cayes</td>
<td>63</td>
</tr>
<tr>
<td>The Body without a Head</td>
<td>66</td>
</tr>
<tr>
<td>The Trip to Les Anglia's</td>
<td>68</td>
</tr>
<tr>
<td>An Anecdote from Larry Chapman, MD. About Les Cayes</td>
<td>69</td>
</tr>
<tr>
<td>The FOCUS Movie</td>
<td>70</td>
</tr>
<tr>
<td>Hero’s in Haiti and post script</td>
<td>71</td>
</tr>
</tbody>
</table>
Postscript \_____________________________ 72
Four Sayings to Learn in Haiti* \_____________________________ 72

Addenda 1. 1964 Clem Jr’s six week tour in Port Du Paix and La Tortue after his junior year in medical school \_____________________________ 73
   A day in Port au Prince \_____________________________ 73
   Three weeks in Port du Paix \_____________________________ 74
   Time in La Tortue \_____________________________ 78

Addenda 2. Nigeria and Focus eye care at the Mercy Hospital in Abak -1976 to early 2000’s \_____________________________ 80
   Background \_____________________________ 80
   1980 Ray and Jay’s trip to Abak Nigeria \_____________________________ 80

Table of figures
1. Haiti is in the Caribbean Sea on the western end of the island of Hispaniola. \_____________________________ 9
2. Jay and Lyn, wedding day \_____________________________ 11
3. The Iron Market in Port au Prince, the capital of Haiti \_____________________________ 12
4. The Presidential Palace in Port au Prince-1962 photo \_____________________________ 13
5. George Houdicourt and family with Dr. Jim Dolan on the exploratory trip to Haiti in 1961. * \_____________________________ 15
6. The route from Port au Prince to Port du Paix \_____________________________ 15
7. Our driver and the van ready to go north to Port du Paix. We had requested a 4-wheel drive Jeep. This van didn’t do too well in the river. \_____________________________ 16
8. On left La Belle Coquette with Rachied Salomon in the doorway of his dry goods shop and on right close up of the hotel’s name \_____________________________ 18
9. Dr. Mark Augustine, boss of the hospital, with some missionaries. He was an excellent administrator and a nice guy \_____________________________ 19
10. Lyn at Customs on our first tour of service in Jan. 1962 with e cartons of FOCUS supplies had been previously shipped to the capital. We were awaiting the jeep for our trip to Port du Paix \_____________________________ 22
11. Our room at the Belle Coquette. The mosquito netting over the bed made the room look like a bridal suite \_____________________________ 23
12. View looking north from our 3rd floor hotel room. We called the street scene “the television set”. \_____________________________ 24
13. The Port du Paix market is on the waterfront. La Tortue is seen across the channel to the north \_____________________________ 24
14. Port du Paix after a rain \_____________________________ 25
15. Dr. Mark Augustine, the administrator of the government hospital [at left, with nurses and staff.] \_____________________________ 26
16. The view from the main gate of the Hopital Immaculate Conception - our base for FOCUS eye surgery \_____________________________ 26
17. This building owned by the hospital was used by FOCUS doctors for all outpatient eye examinations \_____________________________ 27
18. The sign reads “Welcome dear physicians. \_____________________________ 27
19. This is the surgical building of the hospital which we shared with Dr. Augustine’s general surgical patients \_____________________________ 28
20. Dr. Davis Durham and associate with staff in front of clinic \_____________________________ 28
21. The eye clinic was dedicated with great ceremony in January 1962 \_____________________________ 29
22. Patients with eye problems waiting to be seen by American FOCUS doctors \_____________________________ 30
23. This eye has a cataract which obstructs vision. Removal of the cataract will usually quickly restore vision \_____________________________ 31
24. Thick cataract glasses needed after removal of cataracts in those years. Please note FOCUS doctors did NOT fit this man with this pair of glasses \_____________________________ 32
25. A growth across the front of the eye (pterygium) obstruct the vision to cause blindness, but can easily be removed, surgically \_____________________________ 32
26. Dr. Augustine watches Dr. Arthur Light from the University of Illinois and Dr. Charles Wilson from Pikeville, Kentucky doing eye surgery. 

27. Jay McDonald repairing a slit lamp in the clinic

28. Father Lionel, a French Canadian Catholic missionary and a good friend to the FOCUS doctors.

29. Art Light with next day's eye surgery schedule *

30. A typical surgical schedule of Dr. Art Light is shown as it was in the second month

31. Catholic "College" run by Haitian and Canadian priests in Port du Paix

32. Fritz Wheaton the American representative for CARE in the North of Haiti with missionaries and Haitians from Port du Paix.

33. John Nagee (an inspector Sanitair) with FOCUS doctor Al Keleritas in front of hospital in Port du Paix

34. Near Les Cayes off the south coast is the Tablo Diablo (table of the Devil)-Lyn on left. We were told that at midnight the devil can be seen to eat there

35. Children at the Baptist-supported orphanage at La Point near Port du Paix

36. April, 1962 - A teaching nun in her classroom

37. The Citadel located in Northern Haiti but East of Port du Paix.

38. The Laundromat at Twa River near Port du Paix.

39. Daughter Mary Joe, Dr. Art, and Dale, Light arriving in Port au Prince in February of 1962

40. The grand Hotel Oloffson in the Capital.

41. Al Seitz, the manager of the Oloffson, with some entertainers for the Thursday night floor show

42. On another occasion when we were in the capital we saw several large U.S. Marine planes at the airfield.

43. Fishermen on the beach near Port du Paix. La Tortue to the North is seen in the distance

44. Lyn on mule getting up the mountain at La Tortue

45. Native huts in the small village on La Tortue

46. Patients waiting to be examined at La Tortue

47. Outdoor eye examinations at La Tortue

48. Catholic hospital run by Father Riouand French nurses on the island

49. The "eyes in the ground" are Arawak Indian artifacts, easily dug up on La Tortue

50. Lyn in dramatic scene before birth and death, described in the text

51. Street scene in Les Cayes

52. Market day in Les Cayes

53. Lyn with a busy lady

54. Les Cayes street scene with truck

55. Parking lot for Les Cayes Hospital

56. Jeep fording river on road to Les Cayes Hospital *

57. Long line of patients queuing up to register for eye care at the Les Cayes hospital. (Jay McDonald in foreground)

58. Portable autoclave for instruments with surgical technician

59. Lyn with Haitian soldier, one of those assigned to us 24 hours a day

60. This team from the University of Illinois made a recruiting movie about FOCUS.

61. Dr. Charles Wilson and Art Light were on duty in Les Cayes and Port du Paix and helped make the movie. Haitian ophthalmologist Dr. Monsantos helps out.

62. Rasheed Solomon, the owner of the La Belle Coquette hotel and adjoining shop

63. Boats in the Port du Paix "harbor" anchored off shore

64. Montfort fathers building seminary near Port du Paix.

65. Pere Riou (with pipe in mouth) and is core medical team on La Tortue, French Physician and spouse on far left.

66. Abak Hospital an Eye Clinic 1980- pictures courtesy of Ray McDonald MD
Forward 1st Edition

This book is a journal kept by Dr. James McDonald of his experiences and those of his wife, Dr. Evelyn McDonald, in Haiti between 1961 and 1970, setting up and running an eye service at various hospitals in the poorest country in the Western Hemisphere. Dr. McDonald, Dr. Arthur Light and Dr. Thomas Stamm, all ophthalmologists practicing in the Chicago area, founded FOCUS. (Foreign Ophthalmological Care from the United States), a non-profit organization, with the intention of providing free medical and surgical services to people sorely in need of them and they did this without remuneration, as did the many ophthalmologists who also volunteered to work in these clinics, all of whom paid their own transportation and incidental costs themselves.

They were compensated by a sense of accomplishment, but it may not be immediately evident to the casual reader what an onerous task they had set for themselves. The shock of transferring from a comfortable life style at home to living and working in a poor and alien culture comes through quite clearly in the journal, as well as the fascination this culture had for the author. Not every physician does well with the challenge of translating modern medical care to an environment where many compromises have to be made, every day and almost minute-by-minute. The ones who do best have what has been called a sanguine personality: optimistic, flexible and tenacious, not easily discouraged. An abiding sense of humor also helps, and the reader will recognize these qualities in the author as he tells the story.

Even with best of intentions, such an effort as here described depends on conditions in the host country over which the volunteer has little control. The medical and political establishments have to be welcoming and supportive, and there has to be peace with law and order. If the roads are not safe, patients cannot come to the doctor, nor can the doctor get to the patients. 'Conditions in Haiti deteriorated with the death of the elder 'Papa Doc' Duvalier in 1970 and the clinics unfortunately had to be closed. Undismayed, within a few years Dr. McDonald was starting a new program in Nigeria. But that is another story. I have edited this journal with a light hand so as to retain Dr. McDonald's own voice. The illustrations are largely taken from the McDonalds' personal collection.

At the end of this journal is an anecdote that I solicited from Dr. Larry Chapman, who was a FOCUS volunteer in the later days of the Haiti program, and whose memory of his experience, and that of his wife Patty, is too good to pass up. It mirrors Jay and Lyn McDonald's experiences of 7 years previously.

Ron Fishman MD

Forward 2nd Edition

When I visited Jay – (James McDonald), my uncle, in 2014, he pulled out a copy of his Haiti Focus book and showed it to me. He was obviously proud of the book and the work it described, and rightly so. It was a black and white Xerox copy of an original version with wonderful prose, but blurry grey -scale pictures. No electronic version of the book existed – as best we could tell. There were indications that the pictures were pasted into a master hard copy to make the book.
The book tells the story of the FOCUS organization. In Haiti the FOCUS doctors made the blind see. At least 1000 Haitians regained their sight through surgery. Tens of thousands received treatment for other eye problems: refraction problems treated with prescription glasses, and glaucoma and trachoma treated with medications. A focus ophthalmologist could only operate on 10-12 patients per day on their surgery days, but could see 100-150 patients on their outpatient days during which they would fit glasses and treat eye problems medically.

The original book didn’t say much about the FOCUS Nigeria years, which lasted longer, and were even more successful than, the Haiti years. That Nigerian FOCUS project probably restored sight to another three to five thousand people counting the surgeries that the American FOCUS doctors and the full time Nigerian ophthalmologist whom they attracted, performed. So I added a too brief summary of that work and solicited an eye witness account of Jay in action in Nigeria from my brother Ray. Brother Michael also did a tour of duty with Jay but do not have narrative on that.

Jay’s FOCUS story deserved a wider distribution and a better presentation. So with Ginger McDonald’s (Jay’s physician Daughter) help, I obtained a clean hard copy of the book and two boxes of photos. I scanned the clean copy, ran it through an Optical Character Recognition (OCR) program, edited out the miss-reads and the many unwanted formatting characters, and changed the layout and the format. In the boxes of old photos, I was able to find the original color prints for all but three of the photos in the Xerox copy, scanned them, and inserted them into an electronic document. I added a picture of Lyn and Jay’s wedding because the wedding was mentioned in the book. I also did some light editing to clarify meaning, added a small amount of information about the Nigerian, Abak years, narrative from my brother, Ray McDonald about his travels and work with Jay in Abak, Nigeria in 1981, and about my visit to Port du Paix and La Tortue in 1964, (derived from letters I wrote to my family which my father faithfully saved and returned to me 20 years later). Unfortunately, Jay was not in Haiti at the time of my visit so I did not have special opportunity to work with him that Ray enjoyed.

I am sure this version contains some errors of fact and typing. I have some hope in the long term of producing a version with more content from the Nigeria years.

This work I did in thanks for guidance and love I received from Lyn (especially) and Jay both of whom shaped my life in many important ways.

Clem McDonald Jr MD
Dr. James McDonald and a few of his patients in Haiti
A short review of Haitian history

1. Haiti is in the Caribbean Sea on the western end of the island of Hispaniola which it shares with the Dominican Republic. It is southeast of Florida and east of Cuba.

3. FOCUS doctors worked at the Port du Paix and La Tortue (Tortuga) in the North and the city of Les Cayes on the south coast.
Haiti, which means "mountainous", is a country on the western third of the Island of Hispaniola in the Caribbean Sea. The Dominican Republic occupies the Eastern two thirds. Its original inhabitants were Arawak Indians who were enslaved by French planters arriving sometime after Columbus discovered it in 1492. The Indians died out from diseases (probably of European origin) and poor treatment by the French. Thereafter, the French planters imported African slaves to work their sugar plantations and producing a highly profitable business of exporting sugar, coffee and other products. In fact, the gross national product of Haiti around 1800 exceeded that of the infant United States. A slave revolt led by Toussaint L'Ouverture against the French broke out in 1993. Napoleon sent his brother in law, General Leclerc, with 50,000 French troops to put down the rebellion, but they were defeated by the Haitians under Dessalines and Christophe, with assistance from yellow fever and malaria, and Haiti was founded as a country in 1804.

Dessalines was the first president and was assassinated. His successor, “Emperor” Christophe, committed suicide by shooting himself using a silver bullet. Mulattos in the south under Alexandre Pétion set up a separate state, but the country was united by President Boyer. The eastern 2/3 of the island became the Dominican Republic in 1844. French and Creole were speaking Haitians were in the western 1/3 of the island while Spanish speaking remained in the eastern 2/3. The governments of Haiti were very unstable for more than a century, culminating in U.S. Marines occupying the country in 1915 when the latest president was literally torn apart by mobs in the capital Port au Prince. The Marines gave some organization to public affairs and added needed infrastructure to the country. In 1934 under his Good Neighbor Policy, President Franklin D. Roosevelt ended the occupation. The U.S. provided some military advisors to help train the Haitian Armed Forces.

A Haitian physician, Doctor Francois Duvalier, was easily elected president in 1957. At the time of his election, Black peasants were the majority and at the bottom of the economic ladder. The mulattos/ of mixed blood, tended to be well-educated and wealthy, and they occupied most of the leadership positions in the armed forces. There had always been much tension between the blacks and the mulattoes. Duvalier had campaigned as the “Black Duvalier”, to gain favor with the majority - Black Haitians. Because most of the officer corps was of the upper, mulatto class, Duvalier did not trust them and set up his own private force - the black tontons macoutes, loyal only to him. These quasi- soldiers of Duvalier always wore dark sunglasses and carried guns and looked spooky. They repressed the opposition and kept the population in line, sometimes with Brutal force. The army thus lost much of its influence.

Duvalier also allowed that he was a voodoo god and let this circulate among the uneducated and superstitious peasants. He was called "Papa Doc", Papa being a title of reverence for some voodoo gods. He was president in 1961, when we initiated FOCUS in Haiti. The rumor was that Duvalier kept the heads of some of his enemies in the refrigerator of his palace. Our dealings with the tontons macoutes will be described as events unfold. Being white and foreigners, we posed no threat to them or them to us. Or so we thought. More about Duvalier later.
Pre story and Planning

A 1948 Caribbean Air Cruise
Lyn and I met in the mammoth Cook County Hospital (3,000 beds) in late 1945. We were both interns there making 12 dollars per month. Lyn graduated with her M.D. from the University of Illinois, and I got my MD from Loyola University. Both of these institutions were in the inner city adjacent to the County Hospital. In January of 1946 we were both assigned to work for three months on Ward 23, which was one of the female surgery wards. After a few months we fell in love and got engaged. I finished my internship in June 1946 and went on active duty as an army doctor.

We were married in November and sent to the New York Port of Embarkation where we were surprised to find that I would be a transport surgeon on an Army troop ship. Going back and forth between New York and Italy on the ship, I was taking care of about 1000 troops. Lyn went back to Chicago and got a residency at McNeal Memorial Hospital in Berwyn, Illinois. We were blessed with a baby girl, Mary Jo, in December of 1947. At the end of June in 1948, I was discharged and started an eye residency at Presbyterian Hospital in Chicago, and Lyn started a practice near our home in Oak Park.

In December, 1948, we signed up for a two week air cruise by Pan American Airways. Grandparents took care of little Mary Jo, so we could get away. The trip included three days in Cuba, three in Haiti, two in the Dominican Republic and several days in Puerto Rico, then back home via Miami. The Haitian portion of that visit had a great influence on our future.
In Haiti, we were introduced to a dramatic and in some ways sad culture. We landed in Port au Prince at Bowen Field, a decrepit airport in a scene of total confusion. After passing through Immigration, where they checked our passports, and through customs, where our luggage was given the once over, we looked for a taxi to our prearranged hotel above the city on the way to the suburb of Pationville. The Hotel Mon Jolli was a pleasant one run by an American and his Swiss wife. In the morning we noted peasant women walking with heavy baskets of fruits and vegetables on their heads on the way to the market in Port au Prince. Most had walked about 5 miles before passing our hotel and had another 5 or so miles yet to go. We were impressed.

3. The Iron Market in Port au Prince, the capital of Haiti

We took a “tiptip” (taxi) to downtown Port au Prince to see the sights, including the famous Iron Market. This was a huge place about the size of 4 or 5 football field with a tin roof and hundreds of small stalls where Haitian peasants hawked their wares - woven baskets, trinkets of all sorts, voodoo dolls and you-name-it. In the food market nearby, the peasants sold bananas, coffee, melons, corn, lettuce and other fruits and vegetables grown on their own little plots of land. When we returned to the hotel in the afternoon, we were told of the excitement on the street in front of the hotel entrance.

About 10 or 15 peasant women carrying huge baskets on their heads passed by and suddenly stopped and gathered around one lady lying down and going into labor. The Haitian employees of the hotel came out and chased them away saying they could not mess up there. The group moved on down the street about 200 feet and resumed the delivery of the pregnant woman. When finished, the new mother put the newborn in her basket, placed it on her head and with some help from her lady friends, proceeded on to the market. We were astounded by the strength of these people.

Our sight-seeing included the Old Catholic cathedral in downtown Port au Prince. This was recommended because of the painted murals including a large one that showed a Voodoo ceremony (in a cathedral yet). We made a trip outside of the capital to see a Voodoo hunga (priest) who was a white American, formerly a steward on Pan American Airways. He was successful as a Voodoo priest, he told
us, because he had penicillin and sulfa available to him to work his miracle cures. We had the feeling that he was a kind of con-man and were not impressed.

4. The Presidential Palace in Port au Prince-1962 photo

Thirteen years later the idea Crystalizes

Years later (1961), Lyn and I were living in River Forest, Illinois. I was now an ophthalmologist, had a practice in Oak Park and worked 3 days a week as a teacher and researcher on the faculty of the Illinois Eye and Ear Infirmary. Lyn was a psychiatrist at the University of Illinois in Chicago. I did my private surgery at Oak Park Hospital - a small but good hospital run by the Catholic nuns. My friend, Dr. Tom Stamm, who was a classmate at Loyola University School of Medicine also became a practicing ophthalmologist after an eye residency at Cook County Hospital. So we were friends and competitors in ophthalmology practices.

One day in front of Oak Park Hospital, Tom told me that he was interested in volunteering some time with Dr. Tom Dooley in Indo China (now Vietnam). He wanted to know if I would look after his practice while he was away and I agreed. Some months later, he told me the Dooley group required a one to two year commitment of time at an international site. Tom said that since he had a wife and young child, he couldn’t make such a long commitment. Remembering our visit to Haiti some years before, I suggested we could set up our own operation in Haiti, and get practicing American ophthalmologists to volunteer to work one month in Haiti and in each month to be replaced by another.
We could set it up and have it run by the Chicago Ophthalmologic Society. Dr. Art Light, a faculty colleague and friend at the Illinois Eye and Ear Infirmary thought it was a good idea; so we made a threesome.

I had previously read about Dr. Albert Schweitzer in West Africa and how he had influenced a rich young man named Andrew Mellon from Pittsburgh to do similar work. Mellon had gone to medical school and built an impressive tropical hospital in central Haiti named the Albert Schweitzer Hospital. We wrote to him and told him of our desire to run an eye service in his hospital. Unfortunately he was unable to accommodate our plans so we looked elsewhere.

I heard of a Jesuit priest who had been talking with a young general physician, Dr. Jim Dolan. They were interested in organizing some type of medical service in the states or elsewhere where it was badly needed. We contacted them and wrote to the American Embassy in Haiti appraising them of our intentions. They set up an appointment in Port au Prince with a Doctor Wood. He was the chief of the U.S. AID (Agency for International Development) who would assist us in bringing the project to fruition. Jim and I took the necessary immunizations - tetanus, typhoid, small pox, obtained malaria pills, and at the end of August 1961, packed our bags and flew to Miami.

We landed at the Miami Airport on an evening in January 1961. The airport hotel was attached to the airport itself; so we rented a room for the night in preparation for the flight to Port au Prince the next morning. Jim acted a bit weird - he would not get out from the sheet in his bed until I was in the bathroom and the door was closed. Anyway we hit the sack and had a good sleep.

The next morning, we moved our luggage to the big Pan American counter at one end of the terminal. We received our boarding passes to the Pan American plane which had 4 strong engines, each attached to a large propeller. The flight plan required that we fly over Cuba (needless to say without stopping in Castro Land), making our first landing in Kingston, Jamaica. After leaving Kingston, the plane landed at Port au Prince, Haiti after dark. We disembarked, and the Pan Am plane continued on its scheduled flight to the Dominican Republic, then to Puerto Rico and finally back to Miami.

After leaving the plane, we picked up our luggage and passed through Customs in an aura of total confusion. There were many soldiers with guns, hucksters hawking their wares and crowds of Haitians milling about. Taxi drivers were anxious to pick up white passengers (foreign and therefore rich). Several were disappointed when we chose the one lucky cab that took us to Downtown Port au Prince and the Beau Rivage Hotel. We had an evening meal and went to bed. The U.S. Agency for International Development (AID) was located in Port au Prince, and we had an appointment to see Dr. Wood on the morning after our arrival; so he could facilitate arrangements with the Haitian Ministry of Health.

After breakfast we got in a cab and told the driver we wanted to go the AID office. There was a communication breakdown because he didn't speak or comprehend any English and we didn't do the same with French or Creole. To make a bad situation worse he didn't know how to read either, and at the time we didn't know it. When I showed him the address on an envelope, he drove us off confidently to the main street - Harry Truman Boulevard - in a direction we assumed was toward the AID office.

He delivered us to a group of old red brick buildings. Assumming that we were in the right place, we walked into an unimpressive outdoor ground floor office with several Haitian secretaries. After announcing we had an appointment with a Mr. Woo, we sat down while the chief female Haitian disappeared behind a door. A few minutes later a well-dressed, important looking Haitian came out of his office, and I said "Dr. Wood?"

He mumbled something in French which I didn't catch, and I said something like, "I thought you would be an American", which he didn't catch. Anyway, they got an English speaking associate in, and we
explained that we wanted to set up a medical program with rotating American physicians in some part of Haiti where there was a need. He said this could be done in Port du Paix in the north coast of Haiti or in Jeremie on the west end of the south peninsula or closer to the capital in Jackmel to the south. All these arrangements were made on the assumption that we were talking to the AID man to whom we were
referred by the American ambassador. In reality, we were negotiating with the Haitian Ministry of Health! Needless to say later the AID man’s nose was much out of joint when he found out what happened.

7. Our driver and the van ready to go north to Port du Paix. We had requested a 4-wheel drive Jeep. This van didn’t do too well in the river.

Jim Dolan and I had a little disagreement on how to handle the information given to us at the Ministry of Health. I wanted to rent a small plane and visit all three sites, but he refused to fly (perhaps a wise decision). In any event, after consulting with a prominent and friendly Haitian ophthalmologist who had trained in Chicago, Dr. George Houdicort, we elected to visit Port du Paix. Arrangements were made to take a jeep to make the trip, and we were to be picked up the next morning for the 120 mile trip.

The first snafu was that the driver arrived in a station wagon-like vehicle and not a jeep as we had requested. He said "not to worry", exuded confidence, and we believed him. The hotel packed some sandwiches and cokes, and we were off at about 10:00 a.m. -- another mistake. But the distance of the trip was only 140 miles! On the map, the ride looked easy. Along the waterfront for the first half to the city of St-Marc, it was because it was all paved. Then we encountered partially paved roads for the 40 miles to Gonaives. Although that stretch was pretty slow going, after Gonaives, the roads were pure dirt for 60 miles and progress slowed further.

Darkness was beginning to fall. The road deteriorated. Rain started to come down. Several hours later, about 20 miles from Gonaives near Gros-Morne, we had to cross a river - without benefit of a bridge! The driver drove into the river with confidence. Half way across the car stopped stuck in the bottom. Water started to rise through the floorboards. It seemed to wisest thing to get the hell out of the vehicle and walk to the far shore leaving the car and luggage behind. We were thus stranded in the dark in pouring rain and in Nowheresville. To make things a bit more exciting there appeared about a dozen young strong black Haitian men, each carrying a machete. This spooked Jim Dolan more than me because I had been to Haiti before and knew all Haitians carried machetes. They came to help, and tried to help the driver remove the car from the river but to no avail.
After an hour or so, along comes a quarter-ton truck on its way to Port du Paix. It got through the river OK, and the driver agreed to give us a lift to Port du Paix; so we climbed into the back of the truck, which was already occupied by a Haitian peasant lady. A bit later on its way up a hill on the now muddy road, the truck got stuck in the mud. We were told that it was the passenger’s job to push the truck as the driver, by appropriate shifting and clutching, tried to free it. I had lost my shoes in the river incident but joined Jim and the peasant lady in trying to dislodge the machine. Finally it became loose and the driver kept going and going - perhaps for 100 yards up the hill - before stopping in a safe place on the road. The tough looking peasant lady saw my discomfort because of my bare feet on the muddy gravel and took my arm and lifted about 50 pounds of weight off my sore feet.

The remainder of the ride to Port du Paix, except for the rain and the darkness, was uneventful. We approached the town, stopped at the military check point, showed our passports and were allowed through. There was no light in town - apparently the weak city electrical supply is turned off at 9:00 PM. Our driver- rescuer brought us to a small hotel on the waterfront and proceeded to throw stones at the hotel until someone came out and said, “There was no room.” A ship had sunk in the harbor off Port du Paix. All the survivors were arrested, were being held at the hotel, and were to be brought back to Port au Prince in the morning for trial!” This seemed quite odd to us. He then drove us to another hotel - the "La Belle Coquette.”

After standing in front of this hotel for a few minutes, a strange man appeared. He was white. He had a kerosene lantern under his face. The light shown up to his beard and he had a ghost -like face - a picture of Mephistopheles if I ever saw one. By now it was about 1:30 AM. We were tired, somewhat shaken by the experience and hungry. Rachied Solomen, the owner of the place, brought us in, fed us soup and brought out a bottle of Bourbon Court rum that we enjoyed a great deal. Jim had arranged to ride back to the capital in the morning with the driver of the truck. After a trying day we hit the sack.

The next morning after a great sleep, we had breakfast with Rachied and his wife, Marie, a Haitian. Rachied was about 50, and had come to Haiti from Lebanon at the age of 10 to live in a small Lebanese community in Haiti. Like many Lebanese in Haiti, he has succeeded in being one of the richest men in the town of Port du Paix, having a dry goods store where he grossed $50 to $75 on a good day. Above the store, he had about six rooms which he called La Belle Coquette Hotel. His Haitian wife Marie was about 30 or 35, nice looking, but did not seem enchanted with Rachied, hinting to us that Rachied was the reason they have had no children. Marie was the chief of the cuisine and did a nice job.

Back to the project. Jim had an hour before his driver was to go back to the capital, and I suggested that we should at least go look at the hospital which we came so far to see. He agreed, and we walked several blocks through the town, passed the open market on the waterfront, passed the open shop of the coffin makers, and through the graveyard conveniently located immediately adjacent to the hospital buildings. There we met an American missionary nurse, Caroline Bradshaw, originally from Tennessee but for the last 10 or so years working at a Baptist mission several miles to the east of the town. She was jolly and happy to see some fellow Americans. We asked her "What do you think of the idea of having an eye service at the government hospital (Hospital Immacule Conception). Without hesitation she said "It would be a gift from heaven.” In addition, she said that Dr. Augustine, the Chief of the hospital, would be good to work with on the program. The problem she told us was that he was out of town for two more days and suggested that we stick around to talk to him. I agreed, but Jim decided to continue his plans to ride back to Port au Prince with the driver of the truck.

Caroline invited me out to the Baptist compound for dinner that evening and introduced me to the other worker at the "House of Hope", a place of refuge for poor Haitian orphans. This was a most impressive and successful project. The Multicare Compound had a staff of dedicated American and Haitian people.
with different training and skills. Some were preachers, some teachers, some administrators and some medical personnel. Most of the Americans were from the eastern Pennsylvania, and the headquarters of the group was located in Bale Cynwyd, Pennsylvania.

I looked around the area during the two days I was waiting for Dr. Augustine. Port du Paix is a little city of about 5,000 souls and the capital of the North West Department, which is the poorest department in the Republic of Haiti. It's located on the north coast across from the island of La Tortue which lies about eight miles north of Port du Paix on the other side of a channel. More about that place later. Five or six sailboats are usually anchored in the harbor at any one time. These are used for transportation to neighboring coastal towns carrying people, food, chickens, fish and assorted freight of all kinds. The sails are patchwork for the most part. Some of them incorporate ancient U.S. mail bags into their structure. On the waterfront there is a busy open air market where Haitian women sell their wares, usually food. One market lady might have 20 or 30 mangoes for sale, another bananas, another pieces of sugar cane.

8. On left La Belle Coquette with Rachied Salomon in the doorway of his dry goods shop and on right close up of the hotel’s name

After Jim Dolan left for Port au Prince with the driver of the truck, who should appear at the La Belle Coquette Hotel but the chauffeur of the van that we last saw in the middle of the Trois Rivieres near Gros Morne. I was happy to see him with his vehicle because he had our luggage, and he was happy to see me because we had the money we had not yet paid him for the trip. He explained that the river eventually receded when the rains stopped, and then strong Haitian young men helped pull his vehicle from the river -- for a price. Later we heard that, at this, and similar, river crossings in the boondocks - entrepreneurial Haitian youths place large rocks in the river to trap autos and trucks and profit by then going to the rescue and helping to pull them out. In any event, our original driver dropped off my luggage and was going to deposit Jim's luggage at the Hotel Beau Rivage where Jim was to wait for my return. So he left with a reasonable payment for his aborted efforts.

I spent a few days sightseeing in town and about, visiting the Baptist Mission and taking pictures to document the area for our recruiting purposes. I also visited St. Louis de Nord, 5 miles east of Port du Paix, meeting an elderly pair of white sisters who lived in this town all their long lives. This village was later described to me by Haitians in the capital as "a city fit only for goats and pigs." Who was I to challenge this description?

I had dinner at the Baptist Mission and learned more about the House of Hope. This was a noble project and Carolyn Bradshaw was an important member of that group as a registered nurse. At any one time her team cared for about 30 orphans, nursed them back to health and educated them. The team
included six or so Americans, each with different assignments. I was told that periodically an orthopedic surgeon would come to Haiti from Atlanta to do surgery on the little patients. Sometimes the surgeon would operate at Dr. Mellon's Albert Schweitzer Hospital, about 60 miles south of the town. At such time, Carolyn would load up the jeep (called Elizabeth) with 10 or so little surgery candidates with bone TB, bow legs, rickets or other diseases and drive off on the terrible roads.

![Photo of Dr. Mark Augustine, boss of the hospital, with some missionaries. He was an excellent administrator and a nice guy](image)

After a few days, Dr. Augustine, the chief of Hospital Immaculate Conception, and a government employee, arrived back in town. He was a bright, pleasant, capable person, and he welcomed the whole idea of the eye program. He gave a tour of the hospital facility, and said we could convert the library building (which had no books) to an eye clinic and use the main building and operating room for surgical cases. The hospital compound consisted of a separate TB hospital, a medical building, an outpatient area and the surgical building, which housed the operating room and about 25 surgical beds. Our deal was that the American doctors would pay their round trip air fares from the United States to Port au Prince. The Haitian Department de la Sante Publique would provide internal transportation to the Americans in Haiti and provide room and board and laundry in the clinic city. They also would staff the clinic and operating rooms with nurses and translators. The Americans would provide eye equipment, surgical supplies and medicines (except narcotics). We agreed that the Haitians could charge 20 cents for clinic visits, one dollar for minor surgery and 4 dollars for major surgery (cataract, glaucoma, retinal detachment, etc.) including hospitalization. The hospital agreed that no one would be denied eye care for lack of funds.

Dr. Augustine arranged with Rachied for the room and board of the Americans at the La Belle Coquette. We agreed to start the program January 1, 1962. He arranged a ride back to Port au Prince for me with some Haitian soldiers. The ride was uneventful, even in easily passing through the river at Gross Morn. They dropped me off at the Hotel Beau Rivage. I asked the clerk at the registration desk where Dr. Jim Dolan was. His reply was "Doctor, I don't think he liked Haiti. He left the same day he returned from Port du Paix." I worried that other American volunteer might not like Haiti. I went to check in with the Ministry of Health to OK the arrangements with Dr. Augustine, popped in to see Dr. Houdicourt, and flew home via the Dominican Republic, Puerto Rico, and Miami.
Organizing

After returning to Chicago, we had different problems to consider. Recruitment of volunteer ophthalmologists, legal problems of starting a charitable corporation, recruiting a board of directors, choosing a name, setting up a relationship with the Chicago Ophthalmologic Society, getting donations of equipment and medical supplies and shipping them to the clinic in Haiti.

John A. Cook was a classmate and friend of my brother Clarence. He had a good law practice in downtown Chicago and happily agreed to become a board member and handle the legal aspects of starting an Illinois Charitable Corporation. He quickly obtained a federal tax ID number; so that donors and volunteers could deduct expenses incurred in their charitable activities. John did all this legal work pro bono and continued this activity for our organization for the next 38 years!

Dr. Thomas Stamm, a colleague of mine from medical school days at Loyola and at this time a friendly competitor in the western suburbs of Chicago, was another of the founding board members. It was his desire to work with Tom Dooley in Laos that stimulated the project. Like all M.D. board members he volunteered for active work at the clinics.

Dr. Arthur Light, a fellow faculty colleague of mine and a friend was the fourth of the founding board members. As did all the original and later M.D. board members, Art volunteered many times to serve at the clinics. His son Terry Light, a high school student at that time, came up with the name for the project FOCUS—Foreign Ophthalmologic Care from the United States.

The problem of getting expensive ophthalmic equipment was partially solved by Mr. Berny Spiro, the founder and Chairman of the Board of the House of Vision, at the time the leading optical dispensing and related equipment company in the Chicago area. I went to see him in his downtown headquarters and told him that our group under the name of FOCUS intended to recruit Chicago area ophthalmologists to pay their own way to the backwoods of Haiti and do medical and surgical eye care for a month without pay. Each physician would be replaced each month by another. I told him that I hoped the Chicago Ophthalmologic Society would run the project. He laughed and said he would be glad to donate equipment, but he said there was no way we could get volunteers. I bet him that we would. He set the terms, five dollars that FOCUS would not get enough of "these guys" to work in Haiti and the project would not last a year. (One year later I collected his five dollars with his signature on it. I framed it.)

The begging of medical supplies was given a good start at the annual meeting of the American Academy of Ophthalmology and Otolaryngology (AAOO). The meeting of the eye and ENT doctors at that time was always held at the Palmer House in downtown Chicago and attracted 1000 or more physicians and commercial exhibitors. Our board members hit the exhibitors, especially Alcon Laboratories of Fort Worth, Texas. The medical director of the large ophthalmic pharmaceutical company was a retired army medical officer, General Maxwell. We hit it off and he arranged to send us 2,000 tubes of ophthalmic antibiotic (Alcon has been giving FOCUS doctors medications and supplies for the last 38 years!).

The recruitment of volunteer ophthalmologists had a shaky start. One fellow said "Do they have a golf course there?" Another said "Will you pay my $10,000 per month overhead?" Another ophthalmologist, a good friend of mine, said "That is the most idiotic idea I've ever heard". My bet with Berny Spero didn't seem too bright.

I called my friend of residency days, Dr. Charley Wilson, now in Pikeville, Kentucky, and said "Charlie, how would you like to go to Haiti to do eye surgery for a month?" He replied "Mac, where the hell is Haiti?" Before the long distance phone call was over, he agreed. The next volunteer was very important to us. He was Robert Fitzgerald, who was chief of the eye department at Loyola University Medical School. Not
only was he a great guy, but he lent status to the program, as the rest of us were junior ophthalmologists without peer recognition. We were happy he came on board.

The next incident occurred at the Chicago Ophthalmological Society meeting where I was the spokesman for FOCUS and moved that the C.O.S. take over, and manage, the FOCUS program, and that they should do it within a few weeks because the first shipment of supplies would be delivered to Haiti in a few weeks. Our motion was soundly defeated with some caustic remarks such as "You’re trying to give us an ultimatum.” Fortunately for the project, Doctor Dan Snydaker, a respected ophthalmologist, got up and proposed that the matter be discussed at the next council meeting. Dr. Stamm, Light and I went to the council meeting in a few weeks, told our story and our plans. They asked questions and later told us that the Chicago Ophthalmologic Society would not take FOCUS over as proposed but would endorse it. In a sense we were on our own, and would not be controlled by the Society, which was quite cool to the project. In retrospect we should have proposed it to the council first instead of jumping in de novo without laying the ground work. Thanks to Dr. Snydaker we were OK with the Society.

The schedule was set up. My wife Lyn and I would take the first month, Art and Dale Light, the second, Pat and Charley Wilson the third and Tom and Kay Stamm the fourth.
The First Month of Actual Eye Care in Port du Paix, Haiti

The First Three Days
By this time Lyn began to prepare for our month in Port du Paix. This required shots against tetanus, typhoid, yellow fever, small pox, and pills against malaria. We had three lovely daughters, Mary Jo the oldest in high school, Ginger the next and Shelly the youngest, both of whom were in grammar school, and we could not leave them alone. They all went to school within a few blocks of our home in River Forest, Illinois. Fortunately, Lyn’s folks, Joe and Marie Kosar, agreed to come and stay at our house for a month and see that the kids got off to school. We then shipped about 700 pounds of medical instruments and supplies by air cargo to Port au Prince. I arranged for Dr. Susan Trimble, my partner in practice, to look after my patient’s in the office. After packing up, we flew to Miami International Airport and via Pan Am to Port au Prince.

10. Lyn at Customs on our first tour of service in Jan. 1962 with cartons of FOCUS supplies had been previously shipped to the capital. We were awaiting the jeep for our trip to Port du Paix.

At the airport, we hired a cab to the Beau Ravage Hotel in downtown Port au Prince where we were to be met in the morning by Dr. Augustine. After breakfast I left Lyn in our hotel room and, with the room key in my pocket, went out in the street for some reason. Lyn in the meantime wanted to get something in the lobby but was unable to get the door open. It was locked on the outside and needed
the key to get it open. She went to the barred windows and tried to signal some yard workers for help, but because of the language problem they thought she was a professional woman looking for business! About this time Dr. Augustine arrived, saw the situation, and thought it was a great idea that the Americans locked their wives locked up to keep them out of trouble off the street. We all had a good laugh, even Lyn.

The three of us and the driver went to the Custom House near the airport to pick up the previously shipped supplies. In a large old tin roofed building, cartons were everywhere. Some were piled helter-skelter or on top of each other as high as ten feet off the floor. It was a scene of incredible confusion. After searching for an hour or so, we located our cartons among the 1,000 or so in the pile up. Lyn stayed with the packages until we found our transport, then loaded them into the jeep-like Department of Sante Public vehicle.

From the airport, we went directly to the North Country. We were carried through Gonaives, St. Mark, through the river at Gros Morn, and finally to Port du Paix and the La Belle Coquette "hotel." Our room was in the attic two stories above Rachide's dry goods shop. It had three windows, a small sink with occasional running water, a toilet and shower down the hall and two steps down to a landing. The double bed had mosquito netting hung from the ceiling with a round wooden support, and flowed down to the bed like a bridal veil. The idea was to tuck the bottom of the veil under the mattress after you get into bed. It’s also a good idea to make sure there were no mosquitoes inside the netting when doing the tucking. Otherwise, you guarantee free meals for them for the night and possibly a case of malaria.

11. Our room at the Belle Coquette. The mosquito netting over the bed made the room look like a bridal suite.

A flashlight inside the netting was a prerequisite for night trips to the john. Dogs roamed the streets and barked throughout the night. When all quieted down, another would bark and the racket would start anew. Along about four o’clock in the morning, it was the rooster’s time to announce that you should wake up whether you wanted to or not.
We could look out by the window by the north end of the building and see the ocean and in the distance about 15 miles to the north the Isle De La Tortue (the turtle). Looking down, we could view the frontage road that ran along our waterfront. Donkeys - being the main means of transportation for the Haitian peasant - were used to bring produce to and from the market. Unlucky peasants without donkeys carried their loads on their heads. Open sewers, which drained into the river next to the market, lined the streets. Signs of poverty were everywhere in this poorest of countries. We could look through this opening down on the Frontage Street adjacent to our hotel and see Haitian life pass by - children going to school, more affluent Haitians riding their donkeys, women carrying heavy baskets of produce on their heads to sell in the market a half a block to the west. We called this opening the "TV set" because of the unending parade of fascinating real life dramas to watch.

12. View looking north from our 3rd floor hotel room. We called the street scene "the television set ".

13. The Port du Paix market is on the waterfront. La Tortue is seen across the channel to the north.
The dramatic cultural shock of the poverty and change in our surroundings bothered Lyn more than me because I was busy setting up the equipment and organizing the newly launched clinic. She, on the other hand, was quite discouraged and somewhat depressed. This was further aggravated because another couple, not enamored with the project, were going to be in Port au Prince and stated they might "drop in to see how we were doing." Lyn at that time said, "How can you bring them to this horrible place? They will think we are insane."

The next day her mood remained down, but the following day, as she was walking along in the tiny town, she met two young Haitian nuns who invited her into their little convent. It was the only clean place she had seen since arriving in Port du Paix (Nun's convents are easily the cleanest places in most tropical countries). The good nuns served tea and tried to have a conversation with her without the benefit of a common language. Lyn has always been good at charades; so by a form of sign language they asked her how many children she had. Three fingers up gave the answer. Infants? She held her arms in front of her as if she was cradling a baby and shook her head no. She indicated our children's size with her hand, one about four feet from the floor, another four-plus feet and the oldest 5 feet. Immediately after that nice visit her culture shock lifted, and she enjoyed the rest of the month thoroughly. Many of the volunteer doctors who came to Haiti over the next eight years of the project experience the same culture shock and depression for the first few days of their tour.

The Hospital Immaculate Conception and FOCUS Eye Clinic

Once we had made an agreement with Dr. Augustine as to the exact location of the eye clinic (in the "library" building) and completed the arrangements on paper with the Haitian Ministry of Health, we shipped the equipment and medical supplies we had collected in the U.S. to Port au Prince as air cargo to accompany Lyn and me on Jan 1, 1962. Personnel assigned to us included Walter Nottage and several Haitian nurses. Signs were put up on each side of the clinic entrance in French and one in English: "It is part of the agreement between FOCUS and the Department of Public Health that no one will be denied
eye care for lack of funds”. This made it a bit harder for the Haitians collecting for the hospital to extract the 20 cents which was the consultation fee. It was hoped these fees would compensate the hospital for the salaries of the nurses and personnel assigned to the eye service.

15 Dr. Mark Augustine, the administrator of the government hospital [at left, with nurses and staff.]

The separate surgical building was made available to us as needed and consisted of one operating room and about 12 beds for surgical patients. Instruments were sterilized in a pressure cooker over a charcoal stove. During surgery, sterile gloves, gowns, masks and caps were worn by the personnel in the operating rooms just as in the states. Occasionally, we were visited in the operating room by a stray chicken walking through, but I don’t think we had any infections from the chickens.

16. The view from the main gate of the Hopital Immaculate Conception - our base for FOCUS eye surgery
17 This building owned by the hospital was used by FOCUS doctors for all outpatient eye examinations.

18. The sign reads “Welcome dear physicians. Healing Ambassador of our ---brothers. The grateful population salutes you heartily by the organ of Public Health, and Population. God bless you while granting you the graces which are necessary for the continuation of your institution among people.”
19. This is the surgical building of the hospital which we shared with Dr. Augustine’s general surgical patients.

20. Dr. Davis Durham and associate with staff in front of clinic. The signs in English and French read "The American ophthalmologists are here primarily to treat sick eyes and serve the indigent. It is part of the agreement between the Dpt. Sante Public and FOCUS that no patient will be denied eye care because of lack of funds."
In Port du Paix, the Americans were well received by the Haitians. Since it was a small town, everyone knew what we were there for, and they were happy for our eye care. The clinic was always crowded with patients with eye problems. They had great confidence in the Americans. Three examples are described below.

One sunny afternoon I was walking leisurely around near the market in downtown Port du Paix. I saw a man walking with a sour face with a bandage under his jaw, around the sides of his face and tied on the top of his head with a huge bow, indicating that he had a bad toothache. At the time, there was a Haitian dentist working for a week at our hospital. In my broken Creole, I told him that there was a dentist at the Hospital. He immediately smiled and seemed so happy with the news. Then he said “He is American?” I responded, “No. He is Haitian”. Immediately, he turned glum and said,” I keep my toothache”, and walked away.
On another occasion, I was walking in town and stopped to watch several Haitian laborers working on a sewer drainage project. After a few minutes they were looking to me for advice yet! What did I know about sewers?

As I mentioned before, on the occasion of our first trip to Port au Prince, we thought we were at the office of a Dr. Wood, who was referred to us by the American embassy. Instead, because of a language foul up, we were talking to an official of the Haitian Ministry of Health who had no knowledge of the purpose of our visit. Within a few minutes and without asking us for references or credentials, he agreed that we could set up the project in the Government Hospitals in Port du Paix, LeCayes or Jacqmel. I assume that this immediate acceptance of our proposal was because we were Americans.

**Cataracts**

The most common type of operation we performed in Haiti was cataract removal. A cataract is a clouding of the naturally clear lens on the inside of the eye. It is more common in older people and reduces the visual acuity of the eye. It is probably the leading cause of blindness in the world. The operation is done under local anesthesia by injecting anesthetic behind, and around, the eye. In the early years of our time in Haiti, we removed the cataract by opening the eye at the junction of the clear covering of the eye (the cornea) with the white of the eye (the sclera). The incision extended for one half the circumference of the cornea. Four to six sutures were used to close the wound. The patients stayed in bed for four to five days with a bandage on the operated eye. The operations took less than an hour and were usually successful. The patient had to wear thick ugly cataract glasses in order to see well, and these caused size distortion, but that was tolerable compared to not seeing. Since then, the technique improved substantially. Plastic lenses that could be inserted in the eye have eliminated the need for these “coke bottle” lenses, and much smaller incisions made under an operating microscope reduced the healing time and risk.

**The Work in the Eye Clinic and the Operating Room**

After an early breakfast each morning, we would walk past the waterfront market past the shop of the coffin makers conveniently located adjacent to our Hospital Immaculate Conception. We examined the hospitalized inpatients whom we had operated upon previously. This involved removing the eye
bandages, looking at the eyes with a flashlight and magnifier, instilling appropriate drops or ointments or other indicated treatments. Some would be discharged and scheduled for return visits to the eye clinic. Others would have to wait another day or two in the hospital. At that time, only the operated eye would be covered, but bed rest for a few days was ordered. The things we hated to see on post op day one were hemorrhages, infections manifested by a white pus on the inside of the eye or a prolapse of the contents of the eye through the operative wound. Fortunately, these complications were infrequent.

On a clinic day, we might see more than 150 eye patients. Those that we helped the most were the patients who were essentially blind with bilateral mature (white) cataracts. If they could see light and tell where it was coming from, they were excellent candidates for successful cataract surgery.

Cataract patients were admitted to the hospital the day before surgery, had a short physical exam and a few lab tests. On the day of surgery, they were given sedatives and dilating eye drops, brought into the operating room and placed on the surgical table. After surgical preparation with soap, water and antibiotic skin preparation, a local anesthetic was injected by needle behind the eye. The eye was opened with a sharp knife and enlarged with tiny scissors. Sutures placed between the wound edges for later closure of the wound. These were made of fine silk or catgut material. Sometimes a medicine was placed in the eye to loosen the attachments of the cataract lens to the eye. The cataract was removed with a gentle pull with either a fine capsule forceps or a small suction cup placed on the cataract. The eye was closed by pulling up and tying the sutures. An antibiotic was injected and the eye bandaged

23 This eye has a cataract which obstructs vision. Removal of the cataract will usually quickly restore vision
24. Thick cataract glasses needed after removal of cataracts in those years. Please note FOCUS doctors did NOT fit this man with this pair of glasses.

25. A growth across the front of the eye (pterygium) obstruct the vision to cause blindness, but can easily be removed, surgically.

Back in the clinic, we treated many patients with glaucoma (a condition due to elevated pressure in the eye). Over a long period, the pressure destroys vision. In Haiti, we treated this with eye drops and occasionally with pills. Sometimes, if the pressure was not adequately controlled, we did surgery. This required the creation of a new drainage path for the intraocular fluids, thus reducing pressure. Glaucoma surgery usually did not improve the vision but would usually prevent future loss of vision. The
results were therefore not as dramatic as removal of a mature (totally opaque) cataract which made a blind person see.

The clinic was open every morning Monday through Friday. Some patients would come in the evening or in the night and would sleep on the porch of the clinic, waiting to be seen when the clinic opened in the morning. Others would walk for miles to be seen while other patients would come great distances on a donkey. Most of the patients had real problems like cataracts, glaucoma, advanced pterygia (fibrous growths across the front of the cornea), retinal detachments, trachoma, other infections, or traumatic injuries of the eye. We had a good supply of eye medications donated by American pharmaceutical companies (such as Alcon, Merck and others) and brought down to Haiti by the FOCUS teams. As many as 150 patients could be examined in a day. Patients would have a history and vision recorded by nurses or staff. Tensions (eye Pressure measurements) would be taken with a Schiotz tonometer when appropriate. Some eyes would be dilated to allow a better look at the back of the eye with an ophthalmoscope. Visual fields (measuring the extent of peripheral vision) and slit lamp exam (magnified, specially illuminated views of the front of the eye) were done. As needed. X-rays were available in the hospital.

We liked to treat patients whose blindness was due to bilateral mature cataracts because we could almost always give them back their sight. Removal of pterygia also yielded the same dramatic results. The visual decline caused by glaucoma could usually be controlled with eye drops or surgery but not reversed.
27. Jay Mcdonald repairing a slit lamp in the clinic
Another group of people that we and our successors got to know well, were the French Canadian Monfortain Fathers who ran the college (high school) several blocks to the east on the waterfront. Father Lionel and Father Champaign, both from Quebec Province in Canada, and Father Boniface, the Haitian boss of the College were fun to be with. We learned much from them. They all spoke French, Creole and English. They were of the Monfortain order of Catholic priests whose headquarters are in France. They ran the hospital on the nearby island of La Tortue. More about that place later.

The Americans in the area were the Baptist missionaries at The Point where Carolyn and her associates worked. We had dinner there several times during the month and invited them back after we settled down. It was always a pleasure to associate with ones countrymen in faraway places. Carolyn generously drove us here and there in "Elizabeth ", her Jeep. On one occasion Lyn went with Carolyn in the jeep to bring kids with orthopedic problems to Dr. Mellon’s Albert Schweitzer hospital some hours away on the worst of roads. Lyn did some of the driving on trips she won’t forget.

**SNEM, Malaria Control and CARE**

There was an active campaign in Haiti called SNEM run in cooperation with the UN for the eradication of the malaria endemic in the country. This required that workers capture mosquitoes in various houses to see the extent of infection with plasmodium (the causative agent of malaria) in the mosquito population. Since the malaria mosquitoes are only active after dusk, catching them is a nocturnal occupation. Fritz Wheaton, a young American, who represented CARE in the north of Haiti, was asleep one night in an attic room of the La Belle Coquette “Hotel.” He heard two men whispering just outside his bedroom door. "Be careful and be quiet. I will throw this over him and we will have him." As the story goes, Fritz was understandably tense until he finally realized the potential assailants were SNEM workers doing their job of catching mosquitoes at night.

CARE operated a general food distribution program in the north of Haiti, especially during the famine. The program ran continuously for children. Fritz ran these programs in the northern part of the country.
29 Art Light with next day’s eye surgery schedule *

31 Catholic "College" run by Haitian and Canadian priests in Port du Paix
32 Fritz Wheaton the American representative for CARE in the North of Haiti with missionaries and Haitians from Port du Paix.

The work of this American charitable organization was seen to be efficient and well organized as well as much needed in the area. If CARE has people like Fritz and his colleague in Port au Prince working for them throughout the world they indeed have high class talent. One of his jobs was to go through the market in town and see if any of the CARE food donations ended up in the private economy. The charitable shipments of food were usually distributed through local missionary and church groups, rather than through governmental sources, a wise choice!

Walter Nottage

Walter Nottage was our first translator. He was a steady, pleasant worker. Besides speaking good English taught by his Jamaican grandfather, he had other talents as well. He was an artist and painted Haitian Primitives. They seemed of reasonable quality although I am no connoisseur of the arts. Walter developed a pretty good business among the FOCUS doctors, who would often commission him to paint a picture for them. On the occasion of our finishing our first monthly tour of service at Port du Paix, we were waiting in the jeep for the eight hour trip to the capital. We had commissioned Walter to paint a picture for us, which he was to deliver over to the jeep before we left Port du Paix. We said to our Haitian friends that we were waiting for Walter. They said they didn’t know Walter. With our broken Creole, we insisted we would wait for Walter. Five minutes later one of the Haitians said “Oh you mean Walteeeeeer.” Walter was sent for, the painting arrived, and the $35 price that had been agreed upon was paid. The picture hangs in our home in Illinois to this day, many years later.

Besides being an artist with a brush, Walter was also a musician. I believe he was very good with the saxophone. I never heard him play because he had taken a vow never to play that instrument as long as Duvalier and his cronies were in power. When we left Port du Paix for the last time, Papa Doc was still ensconced in the presidential palace.

At one time, we were somewhat overwhelmed with work. I suggested we would work on a Sunday to reduce the backlog. This generated a generally negative feeling among the clinic personnel, finally topped off by Walter saying, "Doctor, it is a sin to work on Sunday." I countered with a quote from the New Testament where Jesus said, "Which one of you had an ox or an ass fall into a pit on the Sabbath
would not help him to get out.” That slowed down Walter’s objection a bit; so we compromised. We worked on Sunday for a few hours, after church!

On one of our trips I had seen a picture in the Capital of the construction of the Citadel. The Citadel was a major fortified castle built by Emperor Cristophe soon after Haitian independence for the purpose of defense against the French, in case they tried to regain Haiti as a colony. I had seen a picture showing Haitian workers constructing the Citadel, and it impressed me; so I asked Walter if he would paint me a picture of the building of the Citadel. After a week or so he proudly presented me with the commissioned painting. To my dismay, he showed the Citadel as it exists today, not its semi-finished state during construction. I said I wanted a picture of the building of the Citadel. He pointed to the imposing structure in the picture and said ”There it is the building of the Citadel.” What could I say? I reluctantly paid the 35 dollars for the painting. It’s in my basement at home!

The La Belle Coquette had an open balcony that continued around in front of the building and overlooked the street below. One day during the lunch hour, we heard a bugle blaring out some unrecognizable noise. Looking down we saw a crowd gathering around an important looking man on horseback who took out a scroll, unraveled it, held it high in front of him and began to read aloud. The crowd listened intently. The bugle blew again, and with that, the people dispersed in all directions, each relaying the official proclamation by mouth to others who passed it to others, etc. We were reminded of the medieval knight reading King Arthur’s orders to his subjects. The internet hadn't been invented yet!
Voodoo

Voodoo is a religion originated in West Africa and carried to the Western Hemisphere by slaves. It involves a chief god with many subsidiary gods who communicate to men through trances and dreams. It is described variously. To a good friend of ours, a Baptist Missionary in Haiti, it is devil worship. To Dr. Augustine it is a religion that gives strength to the people. It has its priests (hunga) and saints (loas). It has a great hold on the people. In Africa, it is called Juju and has incorporated some Roman Catholic flavor into its rituals. In the U.S., people think of it as someone sticking pins in dolls to cause harm to that person. It is more than that. There is a popular shrine in the south coast of Haiti where Haitians come great distances to bathe under the magic waterfall.

A Voodoo Ritual

One night, Fritz Wheaton, Lyn and I were talking to Rachied about Voodoo and said we would like to see a real Voodoo ritual, not like the fake shows that they put on in Port au Prince. He agreed to find us one. On the following night, well after dark, the four of us started off. It was so dark that I fell into one of the shallow sewers lining the street. Thank God I had immunization shots against all of the unusual fatal diseases! We then ventured off into the bush outside of town and proceeded on our Voodoo hunt. While whispering to each other, we listened for the drums. We couldn’t use our flashlights because Rachied whispered "Haitians no like light!"

We crept along in the darkness, and it began to rain at which time Fritz questions "What the hell are we doing out here?!” At that very moment the drums became louder and we stumbled on the thatched hut of the Voodoo ritual. About 15 Haitians were sitting on the ground around a small fire with the drummer pounding out a rhythmic beat that was getting faster and louder. The voodoo hunga was drinking rum out of a bottle and making all sorts of weird chanting noises. He then would spit out some of the rum on the assembled believers but not on us. The drums beat faster, and the Haitians began to dance to the louder rhythm. One of the women seemed to get more energetically into the beat and then fell to the ground like she was having a grand mal seizure. Later we were told that she was then possessed by Loa (one of the Voodoo gods). After another half hour, we decided to quietly pull out of there. This was our night of the Voodoo.

Voodoo Joe

There was another occasion when we were at the in Port au Prince when we met two young American girls visiting the country. One of them had $40,000 a year income which her late father had set up for her (a lot of money in 1964). They were going out of the city to visit Voodoo Joe, a Haitian Voodoo Prince known to tourists. One could say they were early hippies. We were concerned that they would catch gonorrhea or something worse. The one with the money wanted to be a disciple of Voodoo. As far as we know, they left the country in good health a little wiser, but poorer! The one without the money was the disciple of the one with the money.

Doublement, Telephones and Duvalier

The black peasants were led to believe by Duvalier supporters, including the Voodoo priests ("hungas"), that the "Black Duvalier had divine powers and indeed was a Voodoo God, a reincarnation of the Voodoo God Papa Legbo ("Papa" being a term of reverence). How many peasants and how many other Haitians believed this is hard to say. Since divine power was attributed to Duvalier, he was assigned the power of "doublement" - he could be in two places at the same time. Hence, one had to be careful what one was doing because he might suddenly pop in out of nowhere even though he was somewhere else at the same time. Another interesting power attributed to him was the ability to hear conversations anywhere in the country without his being there. This was called "telephos. Both of these remarkable powers
attributed to the president in his role as Voodoo God gave him greater control and possibly greater respect of the peasants. I was discussing Dr. Duvalier’s attributes to one of the employees of the eye clinic and asked him how he dared to say anything disrespectful since he might pop up and have him arrested or shot. He said that we were not important enough, and he only did this for important matters. Thus diminished, I did not pursue the conversation.

Dr. Augustine, an intelligent educated Black Haitian, was the Director of the Government Hospital where we worked. He was our boss at this hospital. When I asked him whether Duvalier really claimed to be a Voodoo god, he answered, “No, he doesn't claim it but he also doesn't deny it.” I am unable to estimate the level of belief of Haitians in these magical powers, but it is said to be widespread. Haiti is 90% Catholic, 10% Protestant and 100% Voodoo.

John Nagee

John Nagee was one of the workers in the clinic at Port du Paix. Our first contact with him was one evening when his mother stopped in at Rachied Solomen’s “hotel” to talk to Dr. Evelyn McDonald. His mother had heard that Lyn was a psychiatrist and wondered if she could help her son who had a big problem. He was about 30 years old and was not married. This was not the problem she was trying to solve: lately he stared off into space, would not talk and would hold himself in unusual positions for hours at a time. Lyn went to see John at his mother’s house and decided he was a catatonic schizophrenic psychotic. Since a female French psychiatrist was in residence at the French Catholic Mission on the nearby island of La Tortue, Lyn suggested that John go to La Tortue with a letter of referral from her. We heard he was given electric shock treatment. Which cast some doubt on Lyn’s original diagnosis (because electric shock treatment is usually reserved for depression).

We did not see John until our next monthly tour of service one year later. What a change!!! He was now a nice looking, rather light skinned Haitian, about six feet tall and slim. He dressed neatly, was of cheerful disposition and full of energy. He acted as a translator since most of the FOCUS doctors spoke no French or Creole, and very few of the patients spoke English. He brought patients in, took their vision and recorded it and their history for the FOCUS doctors. He also stood by during the eye examination and gave directions to the patients after the examinations. Walter, his colleague in the same type of work in the clinic, labored with other eye patients as the day progressed.

I said that John had a lot of energy. For example, during the lunch hour John would run 5 miles to the house of his father for meals and run back the same distance to work after lunch. Noticing this, I think Lyn changed her diagnosis from schizophrenic psychosis to manic-depressive psychosis -- a condition where the patient swings from a dramatic hyperactive high to a depressive inactive emotional low.

John wore a light khaki uniform (like the summer uniform of an American army enlisted man). He qualified for this official uniform because he was an Inspector Sanitary whose job description presumably would have him inspecting everything in the area of Port du Paix to make sure everything was sanitary. Considering the level of sanitation in the area, there would be plenty of work for him, his colleagues and his successors for decades ahead. I was unable to determine exactly what John was expected to do in this capacity, nor did I see any results of same. In any event, John was an effective worker in the eye clinic and a pleasure to work with. His month’s salary was $23 on which he raised six kids.

Like most Haitians, John had interesting spiritual values. He was a good Christian, but he also believed in the religion imported from West Africa by his forefathers. Like most peasants in the area, he believed that Dr. Duvalier was some kind of a Voodoo God. For example one afternoon after clinic, John and I were talking about Papa Doc. He mentioned that, Papa Doc had the power of “telephonos” and
“doublement”. (We did not discuss whether this power extended to the possibility of being in three, four or more places at the same moment).

33. John Nagee (an inspector Sanitair) with FOCUS doctor Al Keleritas in front of hospital in Port du Paix

About Witches, Goblins and Devils
One evening at our "hotel" in Port du Paix, I had a fascinating conversation with John Nagee. Witches were apparently plentiful in the area. I was particularly interested in their mode of travel in the air. They use a broom, but their propulsion is accomplished by sparks and a jet from their anus. He himself hadn’t seen one for sure, but everybody knew that they exist. He knowingly informed me that with the broom as a steering device they could move forward with good speed and accuracy. We did not arrive at a decision on their actual air speed or the range of this unique type of jet propulsion.

John also told me of two unfortunate men who were out on the airport at midnight. The airport was a non-paved field used as a cow pasture except for the three days each week when the DC3 came up to Port du Paix from the capital. On this fateful midnight, the two men were turned into donkeys. When I questioned as to how he knew this, he said that two donkeys were found at the airport the next morning, and the two men were never seen as men after that. The devil was the recognized cause of this tragic transformation.

John told us there was a jeep that through some power of magic could fly through the air, but only at night! These beliefs were common in Haiti, at least in the places where we worked.

In south, just off the road from Port au Prince to Les Cayes, a small island called Tabla Diablo lies about 500 yards off shore. Its name derives from the "fact" that the Devil eats on this tiny island every night at midnight. I never asked the nature of his (or her) meal. I did inquire as to whether an image of the devil would appear if we waited until midnight to look at a picture of the island taken during the day. After some serious discussion, the Haitian driver said he didn’t know. On several occasions over the next several years when we were up at the midnight hour we looked
at the photos. No image appeared. We did not have the opportunity to visit the Tabla Diablo at midnight to witness directly. Another unsolved mystery in Haiti.

34 Near Les Cayes off the south coast is the Tablo Diablo (table of the Devil)-Lyn on left. We were told that at midnight the devil can be seen to eat there.

John's English was very good because his mother was born in Jamaica. He was a pleasant and sincere worker, and we missed him very much when we moved the clinic out of Port du Paix to Las Cayes. While in La Cayes, we heard he had another psychiatric breakdown. Because the French lady psychiatrist had left La Tortue, Lyn referred him to a psychiatrist in Port au Prince with the help of our friend in the capital, Dr. George Houdicourt.

Zombies and the Like
The definitions of "zombie" in the Heritage dictionary are as follows: 1. a snake god of Voodoo cults in West Africa, Haiti and the Southern United States. 2. A supernatural power or spell that according to Voodoo belief can enter into and animate a corpse, or (b) a corpse reactivated in this manner. 3. One who looks or behaves as an automaton. 4. A tall mixed drink made of various rums, liquors or fruit juices.

I want to talk about the second definition, part (b), although after hearing some of the stories about zombies, I felt like imbibing drink described in the fourth definition to calm my nerves. A large number of Haitians believe zombies exist and are called "the living dead". To protect loved ones who have died, as a result of natural causes or an enemy's curse, from being transformed into a zombie, some Haitians will slit the throat of the corpse before burial. It will then be impossible to dig the corpse up and turn it into a zombie. Also we were told that heavy blocks of cement or stone are sometimes laid over the grave to prevent the stealing of the corpse for that evil purpose. Some zombies were pointed out to me from a distance by Dr. Augustine. The explanation is that some powerful medicine is given to the victim; he assumes a death-like trance and is then quickly buried as is the custom in Haiti. After dark, the plotters, in league with the witch doctor, dig up the moribund body and administer a counter-poison that reactivates the zombie-to-be. Because of the long period of oxygen deprivation the victim loses his mental acuity and thus becomes a slave of the perpetrators.

Being of sound mind and interested in research, I asked Dr. Augustine if it would be possible to salvage the brain for study back at the University of Illinois when a zombie finally died naturally. It seemed that if there had been a period of severe oxygen deprivation it might show up on a study by the neuropathology department of the University. Nothing was done about this. There is a town on the way up to Port du Paix called the City of Zombies. I don't know why this is so called and we did not ask our driver to stop in this town!
The Missionaries

The mainline churches support missionaries throughout Haiti. They do their preaching and some proselytizing with various amounts of vigor throughout the countryside. Besides the religion they preach, they are an invaluable asset to the country. They run schools; they run clinics; they run orphanages, and they fill the role of educated counselors to the people. The missionaries come with construction and management skills. They often furnish vehicles for the honest and equitable distribution of food and other charitable donations to the poor. I think it was Dr. Light who said, "If the missionaries are thrown out, the country would lose a lot. The catholic Monfortain Fathers come from France or Canada and work mostly in the North of Haiti. The Oblate Fathers come from the eastern United States and work in the South of Haiti. I was told that these American Catholic missionaries were invited into the Haiti after President Duvalier kicked the Jesuits out some years before. At that time, he had said that if France could expel the Jesuits, as they had done in their country, then why not Haiti?

The Baptist missionaries we met were usually American, headquartered in Bala Cynwood, Pennsylvania, Tennessee or elsewhere in the southern USA. At the time we were in Haiti, there was a friendly and sometimes unfriendly rivalry between the various church groups, and a hostility, especially among the Protestant groups, to Voodoo. In the Northwest department, we saw, and admired, the Baptist orphanage called the House of Hope at La Point several miles east of town as well as a school and church and clinic in the compound. On La Tortue, a hospital clinic and school were run by the French and French Canadians, with the help of German and Dutch volunteers. It was organized and run by Pere Riou a Catholic priest. Also on the mainland was a Catholic City Mission managed by a French Canadian nun. There were other missions supported by religious groups, but we didn’t know much about them.

There were other humanitarian efforts. The best known to us was the Albert Schweitzer Hospital, several hours by road out of Port au Prince. This is an excellent tropical hospital and was founded by Dr. Andrew Mellon and his wife. More about his place later. In the south near Les Cayes the American Oblate Fathers from Lowell, Massachusetts ran a health center.
Port du Paix - Bob Gorsich & the Rat

Bob Gorsich was an eye resident at the University of Illinois in his senior year and volunteered to join me for a one month tour of service at the FOCUS eye clinic at Port du Paix. He was an intelligent and hard worker with many original ideas. For example, he was interested in spear fishing at the nearby channel; so he concocted a bow made out of a stick and a urethral catheter and carved an arrow out of wood and chicken feathers.

One day he complained to Rachied Solemn that there was a rat in his room. Rachied loudly proclaimed "Doctor, me no have rats here!", and kept emphatically defending his hotel. "I saw the rat," said Bob who then retired for the night. The next morning, Bob came down stairs to the breakfast table carrying the homemade arrow with a newly killed rat on the arrow's tip. He had the evidence. Rachied sulked away and was in a bad mood for the rest of the day.
Cap Haitien and the Citadelle and the North Coast

37 The Citadel located in Northern Haiti but East of Port du Paix. It was built by Haitian Emperor Remy Christophe after 1804 to prevent French reoccupation of Haiti. Photo A from Wikipedia, photo B from http://humanandnatural.com/data/media/77/citadelle_lafriere_haiti_8_.jpg
One weekend Dr. Robert Fitzgerald and I had the opportunity to visit the city of Cap Haitien, on the north coast of Haiti, directly to the East of our home base in Port du Paix. Dr. Augustine let us use the hospital jeep and a driver, so we were off. We drove south for an hour or so and then turned north and east to arrive four hours later at our destination. Cap Haitian was called Cap-Français before 1804, when the French ran Haiti and was the military headquarters for the French Army, headed by General Leclerc, Napoleon's brother in law. Later, the black Emperor Christophe built a huge and strong fortress called the Citadelle near the town to prevent the French from reoccupying Haiti.

This impressive fortification was built high on a mountain. To get there, we had to get on a mule and be lead up the steep incline. It would have been extremely difficult to capture the fort with people shooting at you from above as you struggled up the steep embankment. It has never been attacked even to this day, except by the ravages of time. Loose building blocks and old cannon lay around in disarray. That night we stayed at the Mon Jolly Hotel near the city. It was small but clean, up to date and run by a nice looking middle aged woman. The food and drinks were excellent. I think that Madam Bossinious took a shine to Bob but he didn’t seem to notice as far as I could tell. The subject that evening got around to sea urchins and how painful they were if you stepped on them while swimming. We were told that the local standard treatment of such an injury was to urinate on it, or in the vernacular, “to piss on it.” We didn’t learn whether the unfortunate person had to do this to himself or whether someone else’s urination would be more therapeutic. Also, it was not established whether this treatment had to be repeated daily.

The north coast of Haiti as very fascinating. A quarter mil to the west of Port du Paix was the Twav Revieir, a large river crossed by people who would do laundry in it and then beat the clothes with a stick on a rock. Across the river, impassable in times of heavy rain, was another town, and many miles further west was Mole St-Nicholas. To the east of Port du Paix about a quarter of a mile was the College run by a Haitian priest, Father Boniface, and a French Canadian, Father Lionel. The FOCUS doctors related well with both of these dedicated men and visited them several times during their tours of service in Port du Paix.

A mile or two east of this college was La Point, an American Baptist mission housing an orphanage (The House of Hope) run by Caroline Bradshaw. We had the pleasure of visiting there for dinner or professionally several times during our monthly visits. About four miles further to the east was Saint Louis du Nord. Forty miles further to the east of was the large and historic city of Cap-Haitien, once the capital of Haiti and now the capital of the Northeast province of the country. This important city is the second city of Haiti and was the headquarters of the French general who tried unsuccessfully to suppress the Rebellion in the early 1800’s. Somewhere between Port du Paix and Cap-Haitien, the Santa Maria, the flagship of Columbus’s fleet, lies buried under the sea.

Port du Paix, translated as “Port of Peace” was named for the signing of a Treaty of Peace between the French and Haitians in the early 1825. The city itself is on the waterfront, which has a pier and receives large ships occasionally, taking shipments off usually by means of lighters.

I have two stories to tell about the waterfront. One Saturday morning coming into the hospital we noticed a mummy-like figure in a bed bandaged from head to toe. Inquiry revealed that he had burned himself when he had been trying to burn the boat of a captain whose passengers did not have appropriate papers. President Duvalier decreed that the boat of any ship captain whose passengers’ papers were not in order should be burned. Something happened so that the burner got burned rather than the boat. However, to carry out the decree, a second attempt at the burning was to be made that Saturday afternoon. On this trip my daughter Mary Jo, a young American eye resident, Dr. Bill Scanlon, and I trooped over to the pier to see the event of the day. We were the only doctors in town, and some
messenger gave us the word that there was an accident down the road with many injuries. Twenty people piled into a dump truck had crashed and were brought to the hospital. We had to leave the boat burning and go several blocks to the hospital and sew people up for 3-4 hours. When we returned to the pier the assembled crowds had gone and the bulk of the destroyed boat had been burned successfully to the water’s edge. Dr. Augustine took over these patients the next morning, and we found that we had missed a pelvis fracture on one of the 30 injured patients. All patients happily recovered.

The Rains in Haiti
Haiti is a mountainous country. When it rains hard the, water comes rushing down the mountains and what was once a small stream, easily crossed with water only up to ones ankles, changes suddenly and without warning into a raging torrent. Such was the situation one day when my daughter, Mary Jo, and Dr. Scanlon, a young ophthalmologist - part of our FOCUS team - were on the other side of a small creek when the rains came. The creek became an impassable barrier to travel. In fact an old lady and a cow were washed out to sea and drowned. I was worried by the fast moving and deepening waters when a large truck appeared on the other side. The driver surveyed the situation, picked up my daughter and Dr Scanlon and drove the huge vehicle over to our side. I was grateful that he was a veteran of that area and could judge the crossing correctly. That afternoon as the rains continued like a cloudburst, Dr. Scanlon commented, “Boy, you quickly find out who is boss down here.” This observation was made when the streets of Port du Paix were all rivers of water running by our hotel to the sea.

This recurrent condition of the rain causes erosion of the land into the sea, leaving infertile ground for farming. The situation was aggravated by the massive uncontrolled cutting down of trees for the making of cooking charcoal. The erosion contributed to the poverty of Haiti.
Port au Prince (Overlap Period)

By the end of January 1962, Lyn and I had completed the first monthly tour at the FOCUS eye clinic in Port du Paix. Dr. Art Light (a co-founder of FOCUS) and his Wife Dale were due to arrive in Port au Prince for the month of February. We were so impressed with the program that we asked Art and Dale to bring our 15 year old daughter, Mary Jo down to Haiti with them; so she could enjoy the experience during the scheduled two or three day overlap period.

I flew from Port du Paix to Port au Prince to greet the Lights and my daughter when they arrived on their Pan American flight. We overnighted in the capital and traveled to Port du Paix where we all worked together in the clinic and operating room for one day. That night, the Haitians put on a big bash with an orchestra in a nice thatched roof structure on a black sand beach. Our evening started out with an orchestral rendering of what we were able to recognize as the Star Spangled Banner. Art Light whispered to me immediately afterwards, "Gee, I feel like a character out of Emperor Jones". Speeches were given and a fun evening was had by all.

The next morning we said goodbye and Lyn, Mary Jo and I were driven to Port au Prince. Instead of staying at the Beau Rivage Hotel we went to the Grand Oloffson hotel. The structure was built as home for President Sam who was torn apart by the mobs in the streets of Port au Prince. As a result of all this turmoil, in 1915, the American Marines occupied Haiti, lived in this house and added a wing for use as a hospital. When the occupation of Haiti ended in 1933 (under the good neighbor policy of President Roosevelt), it became Port au Prince’s first hotel.

When the FOCUS doctors came to work in Port du Paix and Les Cayes, the hotel was still owned by the same family, but managed by an American, Al Seitz from New York, and his American wife, Susan, a former
FOCUS in Haiti

40. The grand Hotel Oloffson in the Capital. (1st picture from James McDonald’s collection, 2nd picture from Wikipedia)
Mennonite missionary. Dr. Art Light described the structure as a wood building “held together by 125 layers of white paint.”

The hotel stood in the center of a three to five acres walled-in compound high up on the hills that rise on the east side of Port au Prince, so it offered a nice view of the large bay of Port au Prince to the west. About 30 steps rose from the garden and parking area to the center of the front porch which ran almost the entire length of the building and was used for dining. The hotel kitchen occupied the left sixth of the building as you walked up the steps. A large bar, lounge and dining room were inside the building, with a small business office inside on the right. Guestrooms were upstairs. The maternity section added by the Marines yielded eight more guest rooms. Each room had many Haitian primitive paintings, an air conditioner that worked, running water, a toilet and a shower. The landscaping in front of the hotel consisted of large palm trees and other kinds of tropical foliage.

![Image](image.jpg)

**41. Al Seitz, the manager of the Oloffson, with some entertainers for the Thursday night floor show**

In later years, when the politics warmed up, the hotel seemed to have a greater percentage of spies and other undercover types, spooks as we call them. Al Seitz and his wife Susan ran the Oloffson with originality and charm. Each evening at the bar under the famous painting of the orange circle, various characters, including tourists from other hotels, came to enjoy the music and the rum concoctions of the well-known bartender, Caesar. One visitor was Masseur Joliquir, a character in Graham Greene’s, *The Comedians*, described as a "little brown monkey. His occupations must have been gossip columnist, writer, government informer, and dancer of ladies young and old. Over the years, he enjoyed the confidence of successive regimes including Presidents Mamore, Duvalier, Duvalier’s son, and military bosses, as well as President Aristeeed. Like a cat, he had nine lives.

Some guests and visitors said they worked for the government, without specifying which one, and others said they didn’t work for the "government”, although they did. Others didn’t talk. Still others said, "I am a business man” period.

French, English and Creole were the languages at that time. It was generally assumed that those who worked for the State Department and lived at the Oloffson were well out-numbered by spies and spooks of the CIA and secret representatives of other interested countries, not to mention the information gatherers of President Dr. Francis Duvalier.

On a recent visit in January 1997, while we were sitting on the porch in the Oloffson, a former U.S. government agent approached my son in law, Bill Haffeman, and me and said "Well, what are you,
missionaries or technicians?" These were the only classifications of guests of the hotel since the United Nations intervention in Haiti several years ago, as real tourists have avoided the area since the recent political difficulties.
The Famine

In our second tour in Port du Paix, we found that there had been a great drought in the North West province for the past nine months, and as a result, the crops were insufficient to feed the people. People were literally starving. We observed more Kwashiorkor among the children than before. This is a disease of malnutrition in children in which the belly becomes protuberant and their hair turns red. It is very easy to diagnose. The treatment is food, especially protein. The word of this local famine got down to Port au Prince and the American Embassy. As a result, a shipload of food was dispatched from the United States to the Harbor at Port du Paix.

42. On another occasion when we were in the capital we saw several large U.S. Marine planes at the airfield. We were told that they were bringing in emergency supplies of food and medicine for the Haitians because of the famine in the Northwest Department.

Next to the pier on the waterfront was a large, several hundred foot long, warehouse called the Dwane. The shipload of many hundred large sacks of flour was to be stored in the Dwane once it was brought to shore by small boats from the ship several hundred yards away in the harbor. We had finished our work for the day and went to watch the show at the pier. A white ship's officer was surveying the situation and was surprised to see us. He told us that they have six passengers on the freighter, but when they saw the area and the half-naked natives used to load the ship they were too frightened to come ashore.

We assured the guests that Haiti was safe and invited them to come ashore and stop at our hotel for a short beer. We gave them a small tour of the area. In turn, they invited us to have dinner with them on their ship. It was now dark. We hopped on the small lighter with 40 or fifty of the native food porters and pulled up to the side of this huge ship. The Jacobs ladder hung down to the lighter from the deck 40 feet above. At the top of the ladder was an American ship’s officer watching the porters and drinking scotch. Lyn was smartly dressed in a white blouse and shorts. When she appeared suddenly to the officer said “Hey, where the hell did you come from?” She was the only American woman he had seen since arriving and a good looker at that!

Our food on this tour of service was worse than usual because of the famine; so we were happy to have a good meal of beef, potatoes, etc. on the ship. After an enjoyable few hours on the ship, we went back to the hotel. This night was different because the lights at the pier stayed on all night to facilitate the loading of sacks of flour. It was like a Tarzan movie, with all the scantily dressed porters singing some old African songs as they carried 50-pound sacks on their heads into the Dwane. The task continued all night until dawn when the ship departed.
Fishermen on the beach near Port du Paix. La Tortue to the North is seen in the distance.
La Tortue

La Tortue (The Turtle, or Tortuga) is an island just across the channel to the North of Port du Paix. It's about 26 miles long east to west and 1 to 3 miles across north to south. The channel between Port du Paix and La Tortue is roughly 10 miles wide. It was originally populated by the Arawak Indians who left their mark on the area by making small terra cotta sculptures of faces. These Indians were a rather peaceful people who rapidly disappeared after the European arrival in the late 1400's. Some said it was the diseases brought from Europe that the Indians had no immunity to. Others claimed it was the overwork and harsh working conditions of the Spanish and French that did them in. No one knows who the bad guys were. In any event the French, deprived of their low wage workers, solved their labor problem by importing Africans as slaves - a process enthusiastically supported by West African chiefs who supplied the European slave ship captains with their hapless cargo.

But, back to La Tortue, French buccaneers (read pirates) took over the small island and used it as a base for capturing the Spanish ships that had liberated gold and silver from Indians in Central, and South, America. These ships had to pass between the northwest coast of Haiti and the eastern end of Cuba. The high elevation of La Tortue was advantageous to the buccaneers as they could spot the treasure ships from afar, giving them plenty of time to run down the mountain and get their ships ready for the plunder. The word buccaneer comes from the French word “buccaneer” - one who cooks meat on barbecue stand. They apparently could cook and eat outside and still keep one eye peeled for the Spanish treasure ships.

Later, by the time the French plantation owners on the west end of the Isle of Espanola (Haiti) were ensconced and had become rich by growing and selling coffee and sugar, the black slaves were getting restless and justifiably felt they were getting the short end of the stick. You should realize that before the turn of the 17th century, Haiti (the Pearl of the Antilles) had a greater gross national product than the United States colonies, and was the most valuable colony in the New World!

A slave revolt led by Toussaint L'Ouverture ensued and ultimately led to freedom for the first black republic in the Western Hemisphere. This was in spite of the fact that Napoleon sent his brother in law, General Leclerc and 50,000 French troops to put down the rebellion. The slaves were assisted by yellow fever and malaria, which killed off the more vulnerable French soldiers. It didn’t help that the French were at war with England at the same time, but the leaders of the revolution were brilliant tacticians. Napoleon’s sister, and General Leclerc’s wife, Pauline Bonaparte, had built a nice palace on La Tortue and also another near Cap-Haitien. It was rumored that she entertained many of the French officers, one at a time. Her palace was called Sans Souci (without care). However, she had much to care about before the war was over. Independence for Haiti was realized in 1804. The story of Haiti since that time is not a happy one.

Pere Riou and the French Mission on La Tortue

When the FOCUS doctors came to Haiti, the only French Catholic mission was on La Tortue, staffed by a French Priest (Pere Riou), a French woman psychiatrist and her husband, three or four Swiss nursing nuns and a French Canadian priest, Pere Champaign. There was a church, a small hospital, a school, a clinic, and a convent. The petit village that surrounding the mission consisted of several houses, some with thatched roofs some with corrugated metal roves. The population of the island was estimated at 10 to 25 thousand. Most of the patients were inhabitants of La Tortue, although psychiatric patients came also from other parts of the northwest Department of Haiti.

In the early 1960's, the American FOCUS ophthalmologist usually visited the mission on a weekend during their monthly tours of service in Port du Paix, as a guest of Pere Riou. The story of Pere Riou is
fascinating. Before World War II he was an active member of the French Communist Party. One of his assignments was to get himself into prison and organize and lead a prison revolt, which he did. Later he was sent to a Jesuit retreat house to destabilize it. Much to the distress of his communist comrades, he got religion there and eventually became a Monfortain missionary priest, ultimately landing on La Tortue. The French speaking staff, which he headed, fit in well with the French and Creole speaking Haitians.

You will remember that on our first exploratory trip to Port du Paix we didn’t get into the one hotel we tried because it was filled with survivors of a ship that sunk in the channel that day. On our first weekend visit to La Tortue we were reminded of this when a storm blew up while we were approaching the island in a sailing vessel. Barrels, which were supposed to be tied down, started to roll around the deck like in an old pirate movie. We had doubts about the reliability of the boat as one of the sails was made of large patches, on one of which was printed “property of U.S. Mail”. After landing happily on the sandy shore of La Tortue, we mounted our mules for the 2-hour ride up to the mission on the summit.

Pere Riou greeted us warmly and offered us delicious French wine. An upscale Canadian couple were also his guests for the weekend. They were inappropriately well dressed – the man in suit coat and tie and the woman with gold necklaces and earrings. These wealthy guests owned an amusement park in Canada where they had met Pere Riou in Canada. They had admired his work (he was well-known in France and French Canada). Pere Riou invited them to “just drop in” if they were in the Caribbean area. They had no idea that “just dropping in” meant a 10 hour jeep trip across rivers and mountains, a formidable crossing of the ocean channel and finally a mule ride up the side of the mountain in the dark at La Tortue. The fancy lady wasn’t used to riding mules (who is?) and was hanging on to both the mule and Haitian leading the mule for dear life. Someone had died in a tiny village part of the way up to the mission and, as is the custom, people came out in the dark screaming. The terrified lady almost choked the breath out of her mule at that point. After getting to the top, we enjoyed the “tranquillizers” proffered in champagne glasses by Pere Rio. Some years later we moved our eye clinic to La Tortue, but more about that later.

44. Lyn on mule getting up the mountain at La Tortue
45 Native huts in the small village on La Tortue

46 Patients waiting to be examined at La Tortue
Death and Burial on La Tortue

During one of our annual monthly tours of service in Haiti, we were doing our ophthalmology work at the hospital on La Tortue assisted by Swiss nuns who were our nurses.

A young French doctor worked at this hospital in fulfilment of his one year of French military service. We enjoyed his company. One night he had a difficult young peasant woman in prolonged labor who was
making no progress, and in fact, was becoming increasingly weaker. As I remember, there was some cephalopelvic disproportion and in any event the baby still in utero expired.

The doctor had previously considered packing the baby on a sailboat over the stormy sea to the mainland for the services of Dr. Augustine who had done many Caesarian sections, had plasma available and a better equipped operating room than the bare bones O.R. on La Tortue. The doctor in La Tortue decided that the patient could not survive the trip and. Since the fetus was dead, he performed a craniotomy on it, so he could extract it. We were told that the patient went into shock and expired the next morning. Screams where heard during the later afternoon from the surrounding thatched roofed houses as is customary after a death. In addition the bell of the church tolled out its eerie and mournful bong-bong every 10 or 15 seconds. We went to the hut of the deceased as going to a wake. The young girl was laid out in her bed with her attendance card for mass appropriately punched, indicating she was a regular and dutiful servant of God and a churchgoer.

After the funeral mass, the coffin was carried on the shoulders of strong young men toward the cemetery. By now darkness had fallen. The villagers, the French doctor and Lyn and I followed. Drums were sounding. Liquor was being consumed as the group moved toward one of the cemetery gates. Suddenly the men carrying the coffin changed directions and quickly moved away from the gate and ran to another entrance a hundred yards down the road. We were told the purpose of this was to fool the evil Loas (voodoo gods) so as not to bring further harm to the deceased. When the group got to the gravesite, the coffin was lowered into the grave. The drums become louder and faster. Some people danced on the coffin in the ground and liquor was being consumed at an increasing rate. As the only white people in the group of agitated mourners we began to feel uneasy. We thought it prudent to quietly slip away from the group. From our rooms in the hospital compounds, we could hear the drums continuing their insistent beat far into the blackness of the tropical night.

The Eyes in the Ground
While spending a month on La Tortue doing our medical and surgical eye service, we were made aware of Pre-Columbian artifacts buried here and there on La Tortue and also in the northwest province of Haiti. These are carved faces made of clay and baked like bricks. One of the priests had a good collection of them and told us that if we wanted to dig some up ourselves he would get us a little guide.

49. The "eyes in the ground" are Arawak Indian artifacts, easily dug up on La Tortue
We set out one Sunday morning walked a mile to the field, and began to dig in a recently plowed field. Lo and behold we discovered a good one after an hour of digging. There must be thousands of these "eyes
in the ground” on La Tortue alone. Their origin is thought to be from the Arawak or Caribs who lived here before Columbus arrived on the scene. Our little guide had a stone axe, which she said was part of her collection of artifacts of the same origin. This I coveted. We "negotiated" the price as they do in Haiti but couldn’t agree on the number of gourds for the axe. We did agree to have her return the next day when the haggling would continue. Unfortunately the next day the area was hit by a heavy rain which did not let up, wrecking our planned negotiation session. I felt like knocking my head on the wall when I realized we were only 4 gourds (60 cents) apart. You can’t win ‘em all.

Returning from La Tortue
One Sunday while Lyn and I were returning from La Tortue to the mainland on the day following a storm. The boat captain noted something in the distance. We changed course and sailed over to what proved to be an empty rowboat at least five miles from either shore. The boat was taken in tow, now a prize of salvage for our boat captain. What happened to the occupants remained a mystery, probably a tragic one.

When we landed, the Haitian Catholic Pastor at Saint Lewis du Nord invited us to have lunch at his parish house. We were impressed that lunch was served on the nice dining room table with a beautiful white tablecloth. The plates and the silver were elegant and we were told they were antiques left by the French when the Haitians pushed them out in 1804. The most memorable features of this meal was the hundreds of black ants walking here and there across the white table cloth as we ate. Lyn and I looked at each other but said nothing. The priest paid no attention to them and carried on a normal conversation as if it were normal. Probably it was!!

An Obstetric Calamity

50. Lyn in dramatic scene before birth and death, described in the text

One early evening, as the sun was setting, Lyn and I were riding with Nurse Caroline Bradshaw in her jeep named “Elizabeth.” We were traveling on the gravel road paralleling the coast going east toward St. Louis de Nord. Coming toward us at a moderate trot were two strong Haitian men carrying a homemade
stretcher above their heads with someone lying on it? Caroline stopped the Jeep and inquired in Creole whether they were carrying a malad or a cadaver. The reply was that the lady had delivered a healthy baby that morning when the sun was two feet high above the mountain but the afterbirth had not come out and she had been bleeding ever since. They were on their way to the government hospital five miles to the west in Port du Paix.

Caroline told them to put the patient on the Jeep and said they would take her first to her Baptist Mission (La Point) which was on the way to the hospital. Since Lyn had considerable obstetrical experience while a resident at McNeal Hospital in Berwyn, Illinois, she scrubbed and set the patient up in stirrups for a gynecological exam. Lyn reached in and thought at first that the problem was solved because she felt a bloody mass in the vagina that she assumed to be the placenta. It turned out to be a dirty, oily rag incorporated into a large blood clot. The examination showed that the placenta was still in the uterus, (placenta Previa). Since this situation required surgical treatment (not available at La Point), she was transferred immediately by Jeep to the government hospital in Port du Paix. That evening Dr. Augustine, the surgeon in charge of this hospital Immaculee Conception, did appropriate surgery on the patient but, because of the massive blood loss, the patient expired. So many sad outcomes. The patient’s infection with malaria was a contributing factor.

On the next day, we were discussing the situation with Rachied Solomen (the hotel owner). The Solomens had been unable to have children over the years. (Madam Solomen had no hesitation in suggesting that Monsieur Solomen was the problem). She would love to have children. We suggested that they adopt the healthy baby that the woman delivered before she died. Rachied said "No, we don’t know who the father was. Maybe he was a thief. Then the baby would grow up to be a thief." Thusly was the infant’s future determined!

A Theory of Heredity

Rachied, the owner of La Belle Coquette, had a friend, Massuer Gomez, who had a Jewish grandfather, and had arrived in Haiti as a boy. Masseur Gomez was a devout seventh day Adventist, but Rachied was a Christian of the Greek Orthodox tradition. Rachied went to the local Roman Catholic Church almost every day at about 4:30 in the morning as there was no Orthodox church perhaps in all of Haiti, certainly not near Port du Paix. He used to argue religion when he came over to visit. Rachied would say that the Orthodox Church was “solo big” as he extended his hands as far apart as he could and thought he had won the argument. Gomez on the other hand countered that Christ had only 12 apostles and that proved that small is better for a church. Both had strong (I didn’t say correct) views. For example, one day Doris, a bright articulate American wife of FOCUS doctor Jim Cutone, and Gomez were talking about the effect of inheritance on the baby. Gomez said the women contributed nothing to the baby - the father determined all the characteristics of the child. The woman just carried the baby and acts as no more than a sack of potatoes for the baby. Rather than start an international incident, Doris, kind of a nice feminist type, said nothing. Yes, the Haitian men felt it is a man’s world. So be it!

Mssr. Clement was a well off gentleman with glaucoma. He also claimed to have a Jewish ancestor. Considering the sac-of-potatoes theory of Gomez we did not determine whether the ancestor was on the mothers of father’s side. He was intelligent and educated. He helped with setting up the clinic. Dr. Art Light later pointed out with pride that two of the three most “successful men in the small town had some Jewish blood in them.
Second FOCUS Clinic Les Cayes

Exploring possibilities in Les Cayes
In the summer of 1962, the FOCUS project in Port du Paix was in full swing with a backlog of volunteers. Our Board of Directors (Drs. Light, Stamm, our lawyer John Cook and I) decided we should investigate setting up a second clinic in Haiti. The Minister of health had suggested the city of Les Cayes as a possible place for FOCUS before we went to Port du Paix. After consulting with the officials in the capital, Dr. Light and I decided to travel to Haiti to look at the possibility of a clinic in Les Cayes. We met with Dr. Augustine and the minister of health at the Department Sante Public in May and arranged for the four of us to be driven to Les Cayes, 120 miles away. A telegram was sent to the Les Cayes Hospital informing them of our plans. We left early in the morning with a driver.

No paved roads connected Port au Prince and Les Cayes, and the dirt roads were subject to the heavy rain during the month of May. I mean 3 to 10 inches per night, not just sun showers. Sometimes the road is not passable. On our day of travel it was passable but just barely. On one stretch about 400 yards long, the jeep slid side to side in some preformed ruts not seen because of a covering of muddy water. We thought if the jeep could just keep moving, we would be OK. But no, we got stuck in a hole only 5 inches deep with but with 16 inches of soft mud at its bottom. At least 15 people pulled with ropes and levers. After one hour we were liberated by virtue of much cane and mangrove for traction. But the second challenge was even worse—a puddle so deep that the water rose to six inches above the Jeep’s floor board. The fan belt was disconnected, as is the custom when the motor is under water, and the jeep started again. But on starting from this lagoon” we needed new oil for the crankcase. This required the driver to run a mile back to the city of Acre and a pause for a funeral for us.

After 11 hours and 120 miles in a jeep, we finally arrived in the city of Les Cayes on the southwest coast of Haiti. We were put up in a nice tropical hotel in the outskirts of the town. The next morning we were driven to the governmental hospital with its impressive white tropical buildings. However, the telegram informing the hospital people of our intended visit did not arrive until the next day.
The administrator of the hospital was a one armed surgeon showed us a nice operating room and a place for an eye clinic and agreed that he had plenty of hospital beds to fill our needs. We documented the facilities with camera and pen and were impressed. The city of Les Cayes is about 10 times larger than Port du Paix, has a catchment area of several million people and is much more sophisticated. We discussed the situation with Dr. Augustine and the minister of Health and told them that we intended to establish a FOCUS eye clinic at the Government Hospital. Our goal was to initiate the clinic in 1963, about six months away. After an uneventful jeep ride to Port au Prince and overnight at the Oloffson, we returned to Chicago.

Setting up the Clinic
In January 1963, Lyn and I were the first team to staff the recently approved eye clinic on the southwest coast of Haiti. We had brought a slit lamp, medicines and donated medical supplies and the hospital provided nice surgical room. Since ophthalmologists prefer to work in subdued light, the many louvered windows were painted a dark green so the level of illumination in the clinic could be controlled by opening or shutting down the louvered windows. We had another problem, however, that bothered us greatly. It was the lack of running water. The hospital had a large water standpipe about 40 feet high, which probably had a capacity of some thousands of gallons of water. They also had a pump to fill this tank but hadn’t had running water in the hospital for two years! Since we had a nice sink connected to the main water network, I could not understand why there was no running water in the eye clinic. The Haitian doctor in charge said “eau pas bon.” Water no good. I said turn on the pumps - we need water. He did, but within two hours after filling the tank it was empty because all the faucets throughout the hospital were open. We needed water. So what did they do? They put a barrel on the roof above the eye clinic and ran a pipe down to our sink. Every morning Haitians brought buckets of water up a ladder to fill the barrel. We had water! What could I say? Turning off all the faucets in the hospital would seem easier.
Young French Missionary Nuns
In talking to some of the young nuns from France, we were very surprised to learn that they were expected to remain for 25 years at their mission site without any return visits to their home country—a full generation cut off from family and friends. What a price to pay for their dedication and zeal! We were happy to hear that the policy was changing, what with France being seven or eight hours by air. And speaking of nuns, and this applies to French, American, Haitian and Swiss nuns, the cleanest places in all of Haiti (and in the rest of the world in the places we visited) were the convents of the good sisters. The Haitian men including priests and brothers did not follow their example of cleanliness and order. Some even seemed even to preach disorder and lack of cleanliness by their example. When I was in a Catholic grammar school as a youngster the good sisters used to say cleanliness is next to godliness. The message apparently permeated the nunneries throughout the world.

Max Neptune of Les Cayes
The translator assigned to the eye clinic in Les Cayes was named Max Neptune. He was an enterprising young man about 35 of mixed blood, who managed a movie theater in the town. He had a good sense of humor, was bright and alert. Among his remembered statements was "I thank God every day because I have the strength of a Negro and the brains of a white?" When I said "Let's go" (to speed up the clinic patients) he replied "Doctor, does that mean make it snappy?" On another occasion, when a patient came into the clinic with a badly infected eye, he volunteered the suggestion that the patient might have looked at the eye of a dead person. He also made a deal with the priests that he would not show dirty movies at this theater if the missionaries would come to his movie house. They apparently added prestige to his business and thereby increased his profits.
54 Les Cayes street scene with truck

55. Parking lot for Les Cayes Hospital
56. Jeep fording river on road to Les Cayes Hospital *

57. Long line of patients queuing up to register for eye care at the Les Cayes hospital. (Jay McDonald in foreground)
58. Portable autoclave for instruments with surgical technician

On our first operating day at Les Cayes, we scheduled 4 cataracts surgeries, including one on Max Neptune’s father. The operations were uneventful and on post op day one, all of the four looked good. But on postoperative day two, all four of the operated eyes were a disaster. All were infected. Max’s Father’s eye was the least damaged (thank God because his father had only one eye that worked). The other three eyes did not recover but fortunately these three patients had normal other eyes behind their cataracts. The problem was due to inadequate autoclaving of the fluid used for the injected fluids before the no sterile antiseptic powder was added to the retro bulbar injection the problem was solved and did not recur at any time after that unfortunate experience. Needless to say the episode did nothing to elevate our spirits during this trip.

The Body without a Head

Before we get into this morbid subject, we need to review a bit of history. The Dominican Republic (not related to the Dominican Fathers who taught me in high school) occupies the eastern 2/3 of the island of Hispaniola while the western 1/3 houses the republic of Haiti. The two countries did not relate well for many decades. In fact, about 25,000 Haitians who were squatters on the Dominican side of the border were massacred by Dominican troops in about 1943, presumably on orders of the Dominican dictator Trujillo. The reason this fact was not widely publicized was that the worlds’ attention was focused on World War II exploding all over the globe. Needless to say there was much bitterness and tension between the two countries.

In 1963, when Lyn and I were working in the FOCUS eye clinic in the southern Haitian city of Les Cayes, the Dominican Consul in the town was murdered. His body and almost severed head was found one morning and brought to the hospital where we were working. A couple of days later, a special plane from the Dominican Republic arrived in the city. Six grim looking diplomats came to the hospital to escort the flag draped coffin back to their country. People were worried that a war with the Dominican Republic would break out.

As a result, about 150 people, mostly Haitians, who were suspects in this murder were imprisoned by the Les Cayes Army commandant. We heard that an American boy was among those imprisoned. We were worried about him; so went over to the Army post in Les Cayes to talk to the commandant and check on the boy. I told the commandant that I wanted to see the boy and talk to him. He said I could see him but
not talk to him and pointed across the parade grounds where the young white boy was sitting quietly in front of the base dispensary. All of the 149 other arrested were in a dungeon while the American had nicer treatment. I asked the commandant why he had been arrested. He said, "He had a gauze mask and arrived in Les Cayes the day of the murder". You have to understand my French and Creole are almost non-existent and the general’s English was not much better. I said, "Why would you arrest a man for wearing a gauze mask?" He replied irritatingly, "I will show you!" And promptly pulled out the gas mask that the boy had been carrying. The meeting was over.

59 Lyn with Haitian soldier, one of those assigned to us 24 hours a day

Not willing to give up on what we perceived to be a young man with a mental problem caught in the whirlwind of murder and intrigue, we set on a plan to help him out. Our successor FOCUS team was scheduled to be in Port au Prince at the Oloffson Hotel at the very time of these events. Lyn and I put our brains together to send a message to Dr. Wilson and his wife Pet so that the American embassy in the capital could be informed. To avoid attention by Haitian authorities we sent the message in "code." The telegram said “A cool cat is in the clink-tell Uncle". The Wilsons got the meaning, informed the
American embassy, and the boy was eventually released. I have no idea what happened to the remaining 149 people.

From the time of the murder a Haitian soldiers was assigned to us all day and all night. They sat by the table for breakfast, lunch and dinner, sat on the outside of our bedroom door throughout the night and were at our sides all through the day at the clinic and hotel. We didn't know the reason. Were we suspects? The answer came several years later in Port au Prince where we met the general who showed me the "gauze mask". I asked him why he put soldiers at our side all day and all night for many days. He kind of whispered to me "Doctor, being a general in this army is a very dangerous job. One murder of a foreigner in my district is all I could afford." His anxiety about his army job and his life seemed well founded. President Duvalier readily executed people who displeased him. It was nice that he was so highly motivated for our health.

The Trip to Les Anglia’s
When Lyn and I were stationed at Les Cayes, we planned an eye screening trip on towns west of the city. The purpose of this trip was to examine many patients and refer any patients with serious eye conditions to the FOCUS eye clinic at the hospital in Les Cayes. We packed examination equipment in a jeep and took off one Saturday afternoon toward the city of Les Anglais about 40 miles to the west of La Cayes. The road was rough, consisting at times of huge stones buried partly in the ground. It took many hours and we arrived at dusk.

The arrangements were that Lyn would sleep in the convent with French and Haitian nuns and I would stay at the Priests’ house with several American Oblate Fathers. They were happy to have a fellow American houseguest to catch up on happenings back home. After dinner, they found a bottle of rum and I and the priests each drank our share of Bourbon Court rum. At about 10:00 PM we decided to hit the sack. I was given an army cot with appropriate mosquito netting, which I crawled under and tucked in the edges under the mattress to ward off the mosquitoes. After about an hour I woke up to something crawling across my forehead and also on my arms. Since we always go to bed with a small flashlight, I turned on the flash light and to my dismay discovered bedbugs crawling on me. I crawled out of the netting. No way was I going back to the insect convention, so I sat on a chair with my head on the desk trying to get some sleep. The hell with the netting and the mosquitoes. A priest came in about midnight and said “Doctor, are you sick?” “No,” I said, “just bugs!” He said that some transient missionary had occupied the bed recently, and apparently started a new bed bug colony. He fixed me up with a clean cot and I zonked out.

My wife enjoyed the hospitality of the good sisters in an old, dark building on the waterfront. Lyn was greeted by a young French nun who led her to her cell, a cement block structure with a shelf in the wall and a basin of water. She came back a bit later and proudly offered her an old cracked bar of beauty soap, indicating that Lyn should smell it. She then happily came back in a bit with a small cracked mirror about 5x5 inches in size. The nun left, but gave Lyn a candle, which Lyn used to find her way into bed. She was frightened, what with the sea crashing constantly against the outer wall of her cell. Later she had to go to the bathroom so she lit the candle and moved slowly and cautiously down the dark spooky corridor. She heard a low moaning sound ahead of her off the main hall and carefully peered into a room. It was the chapel of the nunnery, where several nuns were praying aloud on their all-night vigil. Much relieved, she moved on toward the bathroom. The commode was above the sea so that deposits were made without plumbing directly to the rocks and the cleansing surf below. Back to bed and sleep. The next morning at church I looked much the worse for wear and Lyn whispered “Are you sick?” “No, just bed bugs.” Later that week the word got out that my hosts had given the American doctor a bed
An Anecdote from Larry Chapman, MD. About Les Cayes

We arrived in Port au Prince in April of 1969, two months after our wedding. We traveled to the government hospital in Les Cayes being driven by an armed Tonton macute driver in an old jeep. The trip of approximately 60 miles took nine hours over a road that we were told was considerably worse in 1969 than it was in 1930. Patty was told to wear a nurse's uniform to make urinating along the roadway easier and quicker. Unfortunately, there was not an inch of road unoccupied as the life of the country passed and lived along the main (only) road to the South.

When we arrived in Les Cayes, our accommodations were at the Conde Hotel, the only hotel in the town, which was the third largest town in Haiti. Our first room was fairly large and contained a bathroom. Unfortunately the bathroom and bedroom were all one room with the toilet being in the center of the room. My princess bride was not happy with the accommodations. We were awakened by, "squirrels" on the roof on our first night. The next morning it appeared that our soap bar had been eaten by the "squirrels". The next morning we moved to a new room, smaller but with a separate attached bathroom, with no door or curtain between the two. Even with no door it was a major improvement. The sink was of modern design with two faucets, one hot one cold. Unfortunately, no pipes were connected to the hot faucet.

The government hospital was adequate. We usually had screening clinic in the morning and did surgery in the afternoons because we were unable to get patients to come to an afternoon clinic as things usually ground to a halt in the afternoon. The wards were fairly large with multiple beds and with chickens and other animals wandering in and out. The OR had a surgical light and was satisfactory for ophthalmic surgery in that most was done with loupes. Surgery consisted of cataracts with some glaucoma and a few strabismus procedures. One day in surgery while I was doing an enucleation, assisted by my wife Patty, she became faint. The nurse brought in an old wooden chair from the porch outside the OR. Happily, we had no infections in the month we were there. The hospital, as in many third world countries, did not provide food or general care for the patients. This was supplied by family who stayed in the area.

Food quickly became monotonous. Creole rice and beans were staples; some fruit was available, and occasional skinny chicken. Some fish. Rum and Coke helped. By the end of the month we had lost quite a few pounds each and Patty lost a half dollar size spot of hair on the top of her head (alopecia areata).
The FOCUS Movie

All of these activities in Haiti were going on when I was a part-time member of the faculty of the University Of Illinois College Of Medicine in Chicago. Dr. Light was on the volunteer staff of the university. Because of professional papers and exhibits, we had become good friends with Fred Sharp, the chief photographer in the illustration studio at the university. Besides his skill as a photographer, he also was a flying instructor. At this stage of the operation in Haiti, we had the job of recruiting two teams of ophthalmologists, one for Port du Paix and the other for Les Cayes. Each month we felt we needed a promotional tool to let American ophthalmologists know we existed and attract them into the program. So we decided to make a movie about the FOCUS project and show it at a meeting of eye doctors. Fred Sharp arranged with the Aviation Department of the University to borrow a small plane, to bring all of the equipment needed to make a movie showing the work in both in Port du Paix and Les Cayes. Dr. Charles Wilson and his wife, Pet, were to be working in Port du Paix and Dr. Light in Les Cayes. So the cast was set and we scheduled the filming.

Lyn and I, Fred and his wife, and Jack Reglener, a public relations officer of the University of Illinois, set out from Midway airport in Chicago in a twin engine propellered plane. We flew non-stop to

60 This team from the University of Illinois made a recruiting movie about FOCUS. From left to right are Jack Righeimer of the P.R. Department and Pilot and Chief Photographer of the University Fred Sharp. Lyn, Virginia Sharp and your truly

Gainesville Florida, refueled and took off. After an hour or so, Fred noted that the oil pressure was low and recommended that we make an emergency landing at Fort Lauderdale. We didn't know the cause of the problem and we were frightened. One quip that helped break the tension was: “Glad we didn’t quit smoking because if we crashed, we would never get lung cancer.” We approached the airport, which had been cleared for an emergency and had fire engines waiting all over the place with lights flashing and
engines revved up. We landed safely. Then instead of going to church to thank the lord we went to a nearby bar while mechanics checked out the plane. We over-nighted at West Palm Beach.

61 Dr. Charles Wilson and Art Light were on duty in Les Cayes and Port du Paix and helped make the movie. Haitian ophthalmologist Dr. Monsanto helps out.

Heroes in Haiti and post script

Heroes

Many heroes worked in Haiti, the only ones I can cite from direct contact are those who worked around Port du Paix, but I know that Haiti has attracted elsewhere. Per Riou, mentioned above, was a towering hero with a long tenure and a massive effect. The Baptist nurses who run a general, and a specialty, hospital La Pointe near Port-du-Paix are all heroes. Their specialty hospital is called House of Hope and specializes in child hood tuberculosis of the spine, an all too common problem in Haiti. City of Hope continues to function even today in 2014\textsuperscript{a} orthopedic surgeons and pulmonary specialists from Philadelphia rotate through the hospital for short periods to operate and help treat the TB. But the nurses and their Haitian physician, whom many described as the Baptist Preacher Doctor, accomplish quite a lot on their own. They built the hospital, provide direct care and recruit outside medical experts.

Through the House of Hope connection, I met a full professor of Orthopedic Surgery from Jamaica, (Kingston University) and enjoyed a scrumptious American style dinner with him. He is was a big hulking man, entirely charming [that description from Mrs. Stamm ] and was also a hero. He practiced orthopedic surgery in England for some years before he came to Jamaica where he built a center for children paralyzed with polio—all paid for personally. He has made nine trips to Haiti so far, and performed hundreds of spinal fusions on Polio patients with excellent outcomes and no fatalities. Before surgery, half of his patients were paralyzed. Afterwards, 75% walk normally and another 20% walk with braces or crutches (a total of 95% get some mobility). Just prior to his visit to Haiti, he spent three months in Africa — his fourth African trip — doing the same thing.

The priests at the Montfort mission (started by St Louis De Montfort ) mostly Canadians, but at least one a Frenchman and one a Haitian—built, and now staff, a big Haitian school and are now building a large seminary by hand. Father Schmidt, a Frenchman with a German name does the engineering and is
their beer-meister. They all served as construction workers for the new Seminary and as teachers for the existing school, and are also heroes.

Sister Toma, met an unmarried couple with three children in the street one day. They explained they couldn’t get because they had no money for the ceremony and no house. Sister Toma promised them both. She came across 17 other couples in the same situation and founded a shanty town called Fatima where they all live. She works with them, makes them follow the rules of her “city”, continually brings in new families and worries constantly about getting enough food to keep them from starving. She has the heart and the courage of a lion, and is another hero. It is up lifting to meet such extraordinarily good humans. And there are many in Haiti. I would love to track their history and tell more about them and what they accomplished.

Postscript
The original goal of FOCUS was to make blind people see in a country of desperate need.

The Port du Paix clinic opened in 1962. A year later, in January 1963, we opened the clinic in Les Cayes, a larger and more sophisticated city of 70,000. For six years, we ran both clinics. One year, we moved the Port du Paix clinic to La Tortue for several months. In 1968, we closed Port du Paix and moved all activity to Les Cayes. Then around 1970, unrest in Haiti grew. The roads became unsafe. Though I personally never felt in any physical danger, the bad publicity in the US made it impossible to recruit enough ophthalmologist volunteers. The clinic closed in 1970. However a noted below, we started another and much larger effort in Nigeria

Four Sayings to Learn in Haiti*
We were told that a person going to Haiti should learn four important sayings in Creole so that they can get along better.

1. Pas cone: This means "I don’t know, I never did know. I never will know as well as we don’t know, etc.
2. Pas Kabab: Translates to "It is impossible" and should be accompanied by a movement of hands as if you washed your hands of the whole affair.
3. Pas gain money: Means "I don’t have any change". It does not mean "I don’t have any money". It just refers to change.
4. Pas fout mye. This might be the most important of the four pas. It means "It’s not my fault". For example we were driving with a Haitian priest up near Port du Paix when we hit a small pig who jumped out of the bush in front of the car. He used this expression.
Addenda 1. 1964 Clem Jr’s six week tour in Port Du Paix and La Tortue after his junior year in medical school

A day in Port au Prince

After my arrival I stayed over the night in Port au Prince. It was an interesting 24 hours. Duvalier had asked for a vote to change to the Haitian constitution so he could be president for life, and it was approved on June 14, just before I arrived. For three months before, "spontaneous" crowds gathered at his palace begging him to take this course. Various and sundry ministers – of tourism, of construction, of finance – erected signs in his honor. I saw one of them, almost the size Comiskey Park’s scoreboard, which stood in front of his palace (the Haitian white house) and read "I am the way and the truth and the flag" with his signature below, all in neon lights. A 10 foot neon-light “flame” was also placed in front of his palace. It had various multi-colored parts that revolved and flickered so as to imitate a flame. It would have been very handsome on the midway of Chicago’s Riverview amusement park.

I ate dinner that night at Oloffson’s hotel, (see Jay’s comments) a charming old Victorian construction which was immortalized under a different name by Graham Green in the Comedians. Meals were served communal style around a big table, where I sat with one correspondent from Time magazine and another from The United Press International, a very interesting Haitian, [Syrian by decent] who was our host and ran the hotel, two young US Embassy officials, a 22 year old self-described “American adventurer” who abruptly stopped talking about his freelance writing when the two seasoned correspondents sat down and one single woman tourist who never said very much but who must have been very brave to be traveling alone in Haiti. The list of people at the dinner table, was by the way, the entire census of the busiest hotel in Port au Prince. The dinner was excellent as was the lively conversation, much of it about Duvalier. Our host told a story about his cousin whom Duvalier considered an enemy; so Duvalier ordered his murder and then personally removed his vital organs and mashed them up, or so the story went.

The embassy people knew about a voodoo ceremony in the Bush that evening and invited me and the two correspondents along. I accepted, but unfortunately the formal ceremony was over by the time we arrived. What remained was a four-man band playing assorted drums with sticks and a crowd of dancers on a 200 square foot dirt floor protected from the weather by a thatched roof. The dancing was almost identical to the modern twist- stomping and shimmying with the one additional ingredient, screaming. Most of the dancers were women. The men were on the sidelines as was also true at US high school dances at that time. I resisted all invitations to the dance floor, but my two Embassy friends looked at one another and then shoved me into the center laughing uncontrollably. I wore white duck slacks and a white shirt, under the naïve assumption that is what you were supposed to wear in the Caribbean. So I shone like a beacon in the dark room “...I danced and danced, but reluctantly as one woman handed me off to another, and everyone had great fun watching. I left the dance floor relieved and nick-named “Ti Blanc” which I guess means "little white one."

The mambos who are the priestesses at the ceremonies are also lieutenants to Duvalier, who is himself a voodoo "priest". They are subject to his control but generally do not like him. The Mambo for this ceremony called me over to talk. She then read my tarot cards. As she dealt the cards one at a time, she rocked from side to side, then began to tremble and finally sobbed when she saw the final card. I would be traveling soon (Correct. I was off to Port du Paix- the next morning) and I would come to great harm. But if I stayed with her, or I bought certain things, I would be protected. My embassy friends hustled me
out to their jeep before the tarot cards made my future any worse, and we headed back to the hotel for the night.

The next morning I met Dr. and Mrs. Stamm and their son Mark. Doctor Stamm would be serving a short rotation as the Ophthalmologist in residence in Port du Paix, and we drove to Port du Paix where we would work.

Along the way, the land was dry and scrubby resembling the land around El Paso. Children run naked in Haiti until about the age of three. It is much simpler that way. We saw lots of them and they were all skinny. Mangy yellow dogs ran loose everywhere, and they were also skinny. Pigs look like large rats, hairy with long balding tales, and not fat. One stretch of land was irrigated for rice farming. This land was quite rich, and the scene was quite different. Beautiful white, black and multicolored egrets stood thin-necked and graceful in the rice patties. Quite a contrast to the pigs. We had to stop three or four times at the police check points, but without disruption.

**Three weeks in Port du Paix**

Our hotel in Port du Paix was the Belle Coquette, a wooden building about that looked like a small cowboy movie hotel from the outside, but with no facilities on the first floor. Port du Paix has a stretch of one and two story buildings including our hotel in a one block “business district”. Most of the roofs are corrugated iron. Some are palm leaves. The streets are all dirt, no asphalt or paving. Chickens, cows (rarely), donkeys, dog’s turkey’s goats and pigs appear intermittently on the street, and they litter dung, which dries and mixes with the dirt and dust of the street. When the wind rises and blows the dirt and dust on every surface of open sewage in one’s face.

The owner of the hotel is Rasheed Salomon, originally from Lebanon. He speaks a perfectly understandable mixture of English and Creole – freely exchanging words from one language to the other. I don’t know if he even realizes that he does this. He also applies a novel syntax to his sentences. Instead of saying “my good friend Dr. Jones” he says, “my good my friend Dry Jones... “And everybody is a “my good my friend“. He worried about me and gave me good advice. His wife is Haitian and her relatives make up most of the hotel’s staff.

One of them – an 18 year old boy who looked 15, insists on speaking only English. I could make out many of his words, but their sequence strung together rarely made sense. What’s worse when I tell him,”J’ai ne compri”, he repeats exactly what he just said. He followed me everywhere. When I went up the stairs, he
followed me, when I enter my room, he entered behind me. When I ask what he wants he says something like “Are you going to the beach”. If I ask him why he is asking, he has no reason. He never smiles, and seems to carry the sadness of all of Haiti on his furrowed brows. He wants to learn English so I work with him.

In Port du Paix, the people are always carrying something: mangoes and charcoal in bundles or bags and water in tin cans, gourds or jars, usually balanced on their heads. The only vehicles you see in Port du Paix, are Jeeps, and you hear them more often than you see them, because they honk at every corner. Noise is everywhere like air. In addition to the honking, you hear loud voices of adults, the chanting voices of children, distant barking dogs, occasional eruptions of donkey braying that sound like a broken cement mixer with gears grinding and a scraping and also the biphasic chortling of turkeys. As background to this symphony, are radios that play loudly enough to suffuse a neighborhood. The town is on the sea and through it flows constant traffic to Nassau, where people go to find work and to the island of Tortue (the island a few miles away) where people go to sell their wares. Boats, stand off from the shore or pull up onto the beach, some painted, blue and yellow, and many in the shades of grey and tan of aged roughhewn wood.

When people speak of poverty in the states, they miss-use the word. Our hotel –which has real income saves and re-uses all bottles, narrow mouth wine bottles and catsup bottles wide mouth pickle bottles it makes no difference. Blank paper for writing is not available at the hospital so they gather printed advertising fliers cut them into quarters and use the unprinted back side for writing prescriptions and notes

It was 7-8 minute walk from our hotel to the hospital and along the way everyone would look at me. I would always say “Comme c’est va”, - which should have been “kouman ou ye” in Creole. Most would give a singsong reply and flash a smile. But some would say nothing and look back with deep staring eyes.

The nights here are something. The stars are brighter and larger and softer than back home. In the evening a big wind always rises and the temperature falls; so the nights are good for sleeping. I got to bed about 9 PM and rose at 5:30 Am. The lack of electricity after 9 or 10 encourages “early to bed”, and need to beat the mid-day heat encourages early to rise”. The town roosters are reliable alarm clocks, crowing loudly just before the sun rose.
I spent most of the last few days with Dr. Stamm in the Ophthalmology clinic or operating room, and learned much ophthalmology, but no tropical or general medicine, which had been my goal. I can’t do much medicine here because, because they won’t let me,

Saturday, Mark (Dr. Stamm’s son) and I helped the French Canadian missionary fathers with their seminary construction project. They are an interesting and enjoyable bunch. Our job was to load their truck building materials that could be obtained from the environment: sand for the floors and river bed rocks for the walls. Their seminary building will not be fancy but it will be solid and attractive (see picture)

![Image](image_url)

**64 Montfort fathers building seminary near Port du Paix.**

The Stamms left for home. Then with only three years of medical school under my belt, I became the only “doctor” at Immaculate Conception Hospital. The two full time hospital physician’s said “take care of things” as they drove off the hospital grounds. They would be gone for 4 days. Though I was not allowed to do anything for the previous week, suddenly had to do everything. The Italian nuns who ran the hospital got me involved in all of the active cases almost immediately: a cyst to drain, an asthmatic boy who needed a shot of adrenalin, a boy with a tonsillar abscess who needed a shot of penicilin, and while running around trying to address these problems, I had avoid stepping on this diminutive Haitian mother who followed closely behind me like a hungry puppy everywhere I went. I would tell her to wait for me in the surgery suite, and rush off but then when I turned around there she was behind me again.

During all of this activity a Haitian man anxiously gestured for me to follow, pointing to his own neck and gesturing that something terrible that happened to someone else’s. I imagined a machete accident. My surgery resident’s words came to mind: “Everything important except for the spermatic cord runs through the neck”. The injured young man was bought to the procedure room of the female word and people flowed in from all over town, packed into the procedure room, and squeezed up against his bed. It was as though all of the gawkers at high way accident followed the ambulance into the hospital and flowed right into the patient’s room. As the gawkers parted for me (The Dr. Livingstone whites I was still wearing, gave me authority), I noticed holstered pistols on the hips, and rifles on the shoulders of a few men. What had happened was this. The patient was the son of the Tonton Macoute captain who ran the
Port du Paix area. The gun toting men where his lieutenants. The injured youth and his friend had been brandishing rifles and pretending to shoot one another, when one of them did.

The boy was very lucky. The bullet had entered the front of his neck, and ended up at its back. I could feel the track of the bullet under his skin that traced an arc around his neck and the bullet itself under the skin where it stopped. My surgery rotation at Cook County Hospital taught me about gunshot wounds. If you could feel the track in the skin, you knew the bullet had traveled under the skin and did not hit anything below. The gun was 22 caliber which was fortunate because the bullets are of low energy and this gun had obviously misfired to yield a very low energy projectile.

The standard antiseptic skin prep for surgery in Haiti was 180 proof rum, close to the concentration of pure alcohol, but much cheaper. So the room reeked of rum after I prepped his neck. I made a one half inch incision, grasped the bullet with forceps, and pulled it out. I felt a lot like Doc in Gunsmoke. The orderly who was helping me, grabbed the bullet and ran out of the room showing it to everyone inside and outside of the building.

My name was made. As I headed back to the hotel, three people stopped me to ask if I had done it. [The operation] The next day the young man’s father asked me to join him in the local bar. He offered me a beer, which I accepted and my choice of any woman in the bar or in town, which I did not. I mumbled something about being, married or being a priest, or having suffered a terrible war accident.

We were without lights and water for washing for three days? I don’t know what caused the water problem, because water availability was always intermittent. A car caused the electricity stoppage. It wammed into the pole just outside the hotel, knocking it down and breaking the power line that ran from the pole to the hotel. The accident actually happened shortly after I arrived. Workers had been on the scene for many days, but did little except to take the fallen wires and broken pole off the street and stand around. Two days after I removed the bullet, Mr. Solomon was grinning like a Cheshire cat and burst into smile when he told me: “everything would be fixed. Doctor too much the study.” (Meaning I study a lot). Less than an hour after that conversation, two open bed trucks pulled up to the place where the telephone pole had been. The back of the first truck, carried a new telephone pole and 4-5 workers. The back of the second truck carried 3-4 men with rifles. The workers put their back to it, and had stood up the new pole and run power wires from the telephone pole to the hotel by early evening. Electricity and lights returned. Mr. Solomon then explained that he had told the gunshot victim’s father that the American Doctor (me)-had come to Haiti for humanity and that he “like too much to study at night, but with no light he can no study.” And thus was the power line repaired. Solomon could not stop grinning about his success. It was one of his only victories in struggles with the Tontons who would routinely take goods from his store as in kind protection payments.

I’ve had a few successes in a few failures at the hospital. One sad failure was and the 11-year-old emaciated boy—probably tuberculosis—who had been sick four months. When I saw him he was comatose, and before we could do anything he abruptly died. My big success was a child with acute diarrhea. Fluids and time healed him.

During this time, Mr. Solomon saved me from what could have been a disastrous decision. A pregnant woman had been having contractions for more than 24 hours with no success. I could feel the fetus through her abdominal in complete detail. She was very thin, so only a thin layer of skin and uterine wall lay between me and the baby. I had not yet had any obstetrics training, but I thought that with a 5 inch incision, I could pull the baby out. There were some medical books, at the hotel, so I went back to brush up on my anatomy, and discussed my plans with Mr. Solomon. He was adamant. “You should no do it. There will be too much the trouble... Big trouble.” And he gestured a severed neck with his hand, meaning my neck. So I waited. That evening he mother delivered. It was a dead fetus whose skin was
macerated which I later learned meant it had been dead for many days. I had had not noticed the absence of a fetal heart tone when I examined her!!

I took over the medicine outpatient clinic during this time and the clinic volume grew from 25 per day to over 100. The Italian nurses gathered the history and translated for me. They also did much of the diagnosing and treatment. We had a very simple armamentarium of drugs. So our treatment choices were few, simple and quick.

Right now I have two young adults with severe anemia and heart failure as a result, but I haven’t the laboratory to be sure it is iron deficiency, nor the blood supply to cure it quickly. I’m counting on bed rest digitalis and iron to correct it over time.

Time in La Tortue
On about July 8, I moved to island of La Tortue for my 2nd three weeks in Haiti. The island is a skinny mountain range sticking straight out of the water for about 15 miles. Eight miles of Open Ocean separate it from Haiti proper. The La Tortue hospital is located 3 km from the beach, but the route is almost straight up to the crest of the mountain range. I assumed I wouldn’t get down to the beach very often.

Before leaving, I had lunch with the de Montfort missionaries. They served soup, bread and butter, tomatoes, juice and sausage for a start—then sauerkraut and sausage—then potatoes mashed up with some kind of meat, and everything in large quantities. We had just as broad an assortment of alcohol alcoholic beverage, and though they were served in small amounts, they had an effect. We also sampled Father Schmidt’s homemade beer, which was quite good. The excessive details about the meal I ate reflects what had been a growing obsession with food born of hunger. At the Belle Coquette, the meal usually consisted of baked rice, mangoes and cooked plantain. For meat, they included variously, small quantities of goat meat—mostly hidden in vertebral bones, skinny fish that were dense with hidden bones and chicken legs with only a few rubber band strands of “meat.” We joked that they killed the chickens by running them to death. For drinks, the hotel offered only water and coffee, and the coffee had the taste of two day old burnt grounds. One night at dinner at the communal table, a rat ran quickly and close to the ground—right over my foot. But I should not really be complaining, the Belle Coquette charged only $3 a day for room, board and laundry. You get what you pay for. I was lean when I arrived and was 10 pounds leaner when I left Haiti.

We crossed to La Tortue in a 22 foot boat through 6 foot waves; so it was a bumpy ride. I could see that the bolts on the exposed drive shaft were coming lose as we pounded waves. So we were lucky that we didn’t lose that shaft and drift to Cuba.

The La Tortue mission was at the top of the mountain. We traveled in a little horse caravan from the beach to the mission and rode trail horses that could climb almost vertically. Most of the horse’s looked well fed. Not mine, its ribs were sticking out like those of Haitian dogs. I worried that my horse’s muscles would suddenly give out, and we would both tumble down to the ocean. We didn’t.

On the first morning on the island, I was awakened by a large, wet-nosed, nuzzling, German shepherd, possibly the only dog in Haiti whose ribs were not showing. I couldn’t get my shoes tied because every time I would put two hands on the laces he would loop his nose under them and lift them to his head. The maneuver said, “Scratch my head.” When I acceded, he thumped the floor mightily with his wagging tail.

The mission complex consisted of a hospital, a clinic, a church, living quarters for the workers (where I would stay), a nursing school, a trade school and an agricultural school each of which had close to 20 students. The island includes some small farms, 10,000 people and Per Riou. Per Riou was to the
islanders as Mike Ditka was to the Chicago Bears and their fans. He made all of the difference. He described himself as the boss of the island.

He is trying to teach the farming and fishing, and right now he wants to get some cheese from the states to supplement the children’s diets. (I wrote to the leadership at Kraft cheese. Got a nice letter back but no cheese.) He’s got a real crew here including a total of 16 professionals from all over: America, Germany, France, Holland, Belgium and Canada as well as a horde of Haitian workers. He pays the Haitians mostly in food. “If I gave them much money”, he said, “they would simply get another wife.” He is a real personality oozing with good humor and a quality which would have to be called power.

From Port Du Paix, I did not picture him as the tall, husky, bushy-browed, spicy witted, and twinkling eyed, Frenchman that he was.

The food here is better than it was in Port du Paix. Though my room was simpler and smaller, just a bed and naked light bulb on the ceiling and roughhewn wood for the for its floor, it had a view from the front and the back showing the ocean to the North and to the South— not the garbage pit I saw from my window at the Belle Coquette. The mission complex had electricity all of the time. If the generators stumbled the batteries kicked in. The hospital was well-equipped and very clean. The most amazing thing about the place was that every bag of cement, every pipe, and every piece of sheet metal, every refrigerator, every piece of operating equipment and the two big diesel generators were all carried up the 3000 vertical feet by man and beast.

I was told that a ship loaded with bulldozers, bags of cement, powdered milk, eggs etc. intended for Per Riou and or La Tortue waits in a Canadian port, but doesn’t sail because the central government won’t let it in. If a ship carries 2000 bags of cement, the government wants 1500 of them. If a business becomes successful it is taxed to the brink of extinction. For the moment, Per Riou will not accede to the demands, so the boat waits.
Addenda 2. Nigeria and Focus eye care at the Mercy Hospital in Abak -1976 to early 2000’s

Background
After Haiti became politically unstable, the FOCUS effort in Haiti foundered as Jay explained above, and FOCUS relocated their project to Central America (I think Guatemala) for a period of time. So far, I have not been able to learn much about this epoch; so I cannot say more. In 1976 FOCUS (Jay) made a connections with Mercy hospital in Abak Nigeria and made the same commitments and worked under the same arrangements as in Haiti. American Ophthalmologists would rotate to Nigeria for 2 week tours (or longer) to treat the same causes of blindness (plus a few others) that they treated in Haiti. The hospital would provide room and board, and the physicians would pay their own travel expenses. Marilyn Miller, an ophthalmologist who was Jay’s partner for a time, was a major force in the Nigerian FOCUS epoch. She has made 28 trips to Abak, and is now president of FOCUS and trying to resuscitate the ophthalmology effort in Abak, which closed down a few years ago.

The Nigeria effort was both the longest lasting and the most successful, of the FOCUS efforts. It achieved ignition, (became self-sustaining) for a long time, with at least one full time Nigerian Ophthalmologist, who treated patients and trained a cadre of Nigerian Ophthalmology residents. During the “self-sustaining” period in Abak, the FOCUS doctors spent more time training Nigerian physicians than treating patients; so built up the supply of local Ophthalmologists producing a multiplier effect. Jay traveled to Nigeria twice a year for at least 20 years (40 trips). This project foundered on some local political problems that led to the departure of the full time Nigerian mammologist. But the situation has improved, and Dr. Miller is optimistic that it can be revived if they could supply some equipment and recruit a Nigerian Ophthalmologists, which seems likely.

Jay did not write about the Nigerian years. So I don’t have the rich material that was available for Haiti. For now, I do have nice description of Ray McDonald MD’s travel with Jay to Abak. I hope that we could get some stories and much more detail about life the people in Abak for a future edition of Jays “book”.

CM

1980 Ray and Jay’s trip to Abak Nigeria
My Uncle Jay, the Ophthalmologist, who was my father’s youngest brother, asked me, the internist, to help him treat eye patients on his next trip to Mercy Hospital in Abak, Nigeria. The head of the hospital had invited FOCUS to provide eye care there in 1976.

We flew to Lagos from Chicago via Hamburg. When we disembarked in Lagos, a mob of Nigerians pushed toward us vying to carry our bags. Jay who always walked fast, continued to carry his bags but picked up speed and pushed right through the crowd without looking to right or left. I never figured out whether he did this because he was worried about losing his luggage if he gave it up to one of the would be porters; whether he thought choosing one and leaving the rest without work, might start a riot; or whether he just wanted the exercise. But he always pushed forward toward his next goal, like that; so it may have been by habit rather for than any specific reason.

We had to stay overnight in Lagos, before the final leg of the trip to Abak. A taxi took us over a very bumpy road to a small out-of-the-way hotel for the night. The lobby was hot, and along one wall of the lobby was a small bar where men were standing and drinking bottles of warm beer.
Our room was on the 2nd floor up one flight of stairs and had two simple beds. Without saying much, Jay took off his shirt, shoes and trousers, and in his deliberate and hurried way lay down and immediately fell asleep, not surprising, because we had been traveling for a long time

Jay seemed to have no fears and never worried. So I took on the duty of worrying for us both. We were a long way from home, in a cheap hotel full of large muscular men who were poor. We stood out as small non-muscular men who might be rich. The room had a door, but no lock. I pushed an old sofa up against the door as a barricade. I was tired too, and wanted to sleep, but cock roaches, some

![Google Map of Abak and Lagos](image1.jpg)

A Google map showing Abak and the today’s travel times from Lagos, by air and by car. It took fourteen hours back then to move supplies by road from Lagos to Abak

The size of a crayfish, and other large bugs were clattering across the floor, and a large neon sign was flashing brightly through the open window. It was too hot to close the curtains. Jay dozed soundly while my fight and flight hormones kept me awake.

Our destination for the next day was Mercy Hospital, a catholic hospital in Abak in the South East of Nigeria close to the ocean on the South and Cameroon on the West. (See map above.) The predominant tribe in the Southeast is Igbo who are mostly Christians and well educated. Abak is located in the region that became known briefly as the republic of Biafra when it tried to separate from Nigeria in 1967, but it lost to the central government after a 2½ year civil war during which one 1 million people died. Abak was the economic hub of South Eastern Nigeria but is the shadow of its former self due to politically motivated neglect by successive governments” (Wikipedia). Importantly, out of the human tragedies of this war came the organization called “Doctors without borders”

The flight from Lagos to Abak was scheduled for a bit more than 2 hours. We climbed into a small, two engine prop plane with 12 passenger seats. Everything began normally. The plane started its two engines and rumbled down the runway. Then we heard an irregular thump, thump, thump sound outside of the plane, and I could see luggage falling out of a side door of the plane. The plane was run by a German company. So much for German precision, I thought. The pilot quickly realized what was happening and aborted the takeoff. After gathering up the bags that were scattered along half of the length of the runway, we started up again, this time successfully. But I could not help thinking about worse things that could go wrong on flight whose ground crew could not remember to secure the luggage door. Jay seemed nonplused. I must have inherited my threshold for worry from my mother’s side of the family

A white car with a very black driver met us at the Abak airport and drove us to the hospital. When we got in the car, Jay remarked that we never drive our own vehicles here. “If you get in an accident and kill
someone, they may bury you with the victim. “Besides,” he said: “you don’t want to get hurt because
the blood supply at the hospital is limited and may be contaminated.” This statements did nothing to
assuage my growing nervousness about the trip.

66. Abak Hospital an Eye Clinic 1980- pictures courtesy of Ray McDonald MD

The major goal of the Mercy Hospital FOCUS eye clinic at that time was to who find people who were
blind because of cataracts (and a few other problems, such as Pterygia) in both eyes. We would replace
the natural lens that had become opaque (developed a cataract) in one eye, with a clear artificial lens,
and “voila” the patient could see again. Jay and the other ophthalmologists who took on FOCUS
rotations in Nigeria would do 10-12 of these replacement surgeries a day twice or three times a week.
They examined 100’s of patients on the days they worked in the outpatient clinics during which they
would screen for surgical candidates and to treat non-surgical eye problems such as glaucoma and fit
glasses. One or more US ophthalmologists traveled to Nigeria for 2-4 week stints, to cover 20-40 weeks
of the year since 1976. They restored sight to many thousands of blind people during that time. The
patients were so grateful! I remember telling Jay that I never felt more useful in my life.

One small child had a huge and horrible looking tumor growing out of his right eye socket. It had
completely replacing the eye. The parents hoped mightily that we could restore it. We had to explain to
them that that would not be possible. It was very sad. We did finally obtained permission to operate for
cosmetic reasons, and obtained a fairly decent result.

We lived in a house surrounded by huge termite hills. A young man named Friday shopped for food, and
cooked for us. Our man Friday tried to find “American” food that would match our tastes, but there
were no Jewel food stores nearby, so he rarely succeeded. I remember a scrawny chicken he brought
back one day. I lost ten pounds during the two weeks of my Abak state. That was the first time and the
last time I lost weight as an adult.

We visited the home of the African cardinal who elected pope John Paul. He was a very kind and
interesting man. Another night we traveled some distance to visit some Irish missionary priests. We
enjoyed dinner, beer and banter. We laughed for most of the evening.

Except for that respite, we worked most days into the evening. We would screen patients on one day,
then operate on cataracts and other correctable eye problems on the next. One Sunday, our day off, we
drove to a river and took a canoe ride with the goal of seeing hippos and crocodiles. But don’t think we
saw any.
All in all uncle jay was pleasant company and easy to live with. He taught me much about eye disease and how to travel in a third world country. I think he is truly a great man and am very proud that he is my uncle.

Index

Boyé, 9

C

Caesar, 49
Camero, 80
Cap Haitien, iv, 44, 45, 53
CARE, i, iii, 33, 35
Carolyn Bradshaw, 17, 33
cataract(s), iii, 18, 29, 30, 31, 65, 68, 81
Charley Wilson, 19, 20
Chicago Ophthalmologic Society, 13, 19, 20
Christophe, iv, 9, 44, 45
CIA, 49
Citadelle, i, 44, 45
city of Acre, 60
Clarence, 19
Conde Hotel, 68
Cook County Hospital, 10, 12, 76
Creole, 9, 13, 28, 33, 35, 38, 49, 54, 59, 66, 68, 71, 73, 74
Cuba, 8, 10, 13, 53, 77

D

Dan Snyderaker, 20
Department de la Sante Publique, 18
Dessalines, 9
Doctors without borders, 80
Dominican Republic, 8, 9, 10, 13, 18, 65
doublement, 37, 39
Duvalier, i, iv, 37, 38, 42, 45, 49, 67, 72

E

emergency landing, 69
eye care, i, ii, 7, 18, 19, 24, 27, 28, 64, 79

F

Father Schmidt, 70, 77
FOCUS, i, ii, iii, iv, v, 7, 8, 9, 19, 20, 21, 24, 26, 27, 28, 30, 31, 33, 35, 38, 39, 43, 45, 46, 47, 53, 59, 60, 61, 65, 66, 67, 69, 71, 79, 81
Francois Duvalier, 9
Franklin D. Roosevelt, 9
Fred Sharp, iv, 69
French, i, iii, iv, 9, 13, 24, 27, 33, 36, 38, 40, 42, 44, 45, 49, 53, 54, 56, 57, 58, 66, 67, 75, 78
Fritz, iii, 33, 35, 37
Fritz Wheaton, 33, 35, 37

G

General Leclerc, 9, 45, 53
General Maxwell, 19
Ginger McDonald, 20
Gonaives, 15, 22
Graham Greene, 49
Gros Morn, 22

H

Haiti, i, ii, iii, iv, v, vi, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 29, 31, 33, 35, 36, 37, 38, 39, 40, 42, 44, 45, 46, 47, 50, 53, 56, 57, 58, 59, 60, 61, 65, 66, 67, 69, 70, 71, 72, 73, 74, 76, 77, 79
Haitian, i, ii, iii, iv, 9, 11, 13, 15, 16, 17, 18, 23, 24, 28, 29, 33, 34, 35, 36, 37, 38, 39, 44, 45, 49, 54, 58, 59, 61, 65, 66, 67, 70, 71, 72, 73, 75, 77, 78
homemade arrow, 43
Hotel Beau Rivage, 17, 18
Hotel Mon Jolli, 11
Houdicourt, iii, 14, 18, 40
House of Hope, 16, 17, 42, 45, 70
hunga, 11, 37

Immaculate Conception, i, iii, 18, 24, 29, 75

Jack Reglener, 69
Jacqmel, 29
James McDonald, iv, v, 7, 48
Jim Cutone, 59
Jim Dolan, iii, 13, 14, 15, 17, 18
John A. Cook, 19, 60
Juju, 37

Kosar, 21
Kwashiorkor, 51

La Belle Coquette, iii, 16, 17, 18, 22, 33, 36, 59, 73

La Point, iii, 42, 45, 59
La Tortue, i, ii, iii, iv, vi, 8, 17, 23, 33, 38, 40, 42, 52, 53, 54, 57, 58 59, 7, 72, 78
Sans Souci, 53
Santa Maria, 45
Scanlon, 46
Schoitz tonometer, 31
sea urchins, 45
small pox, 13, 21
St. Louis de Nord, 17, 59
St. Mark, 22
Stamm, 20, 60, 70, 72, 73, 75
Susan Trimble, 21
tarot cards, 72
telephonos, 37, 38
The Comedians, 49
tiptip, 11
Tom Dooley, 12, 19
Tom Stamm, iv, 12, 19
Tonton macoutes, 9, 68
Toussaint L'Ouverture, 9
trachoma, v, 31
Twa Revieir, 45
urethral catheter, 43

Voodoo, i, 9, 11, 37, 38, 40, 42, 57, 72
Voodoo priest, 11

Walter Nottage, i, 24, 35
Ward 23, 10
Wilson, iii, iv, 32, 66, 69, 70
Wood, 13, 29

yellow fever, 9, 21, 53

zombies, 40

1 Albert Schweitzer Hospital in Haiti  http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1447782/

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