

Report Mercy mission



1.9 MTRS

## HANDS ACROSS THE OCEAN

These children live aboard the African Mercy, a hospital ship staffed by their parents, who are bringing hope and healing to Sierra Leone. By Dan McDougall. Photographs: Marco Di Lauro

Left: the children who live on board form strong friendships. Below: orthopaedic patients are helped on to the deck for fresh air



The deck of the cruise ship creaks and blisters in the west African sun. From beneath a weather-beaten lifeboat tarpaulin, a group of giggling school children hot-foot around enormous steel rigging bolts, as if each one is a piece of burning coal, before plunging headlong into the pool. From the upper tier of the vessel their laughter floats out across Freetown's war-ravaged harbour.

A narrow road carves an artery from the quayside through the corrugated roofs that form the slum heart of one of Africa's most destitute cities. Along the thoroughfare amputee beggars work the traffic, wiping greasy stumps against windscreens. At junctions, teeming with cigarette and Sim-card hawkers, children sit with wild dogs in drains.

Home for the unique band of youngsters frolicking in the sparkling pool is a passenger ferry that once plied the Baltic. Rising above the harbour's grime, the gleaming vessel, formerly known as the Dronning Ingrid, is today the only sign of modernity on the entire

coastline of Sierra Leone. To the people of this impoverished African nation, the Africa Mercy represents a desperately needed lifeline.

A 500ft-long floating hospital, weighing 16,500 tons and accommodating 450 crew and medical staff, the Mercy is equipped with six operating theatres, an intensive-care unit, recovery beds for 78 patients, an ophthalmic unit and two CT scanners. Over the next 12 months her staff will perform 7,000 operations.

The eight decks have been transformed to include crew and staff quarters, a fully catered restaurant, gymnasium, shops and even a Starbucks. The children believe they lead a blessed life on board, despite the heat and the confines of ship life.

"It is incredibly sad to see people who are so ill," says Kylie Bergman, 10, one of the kids photographed jumping into the pool [in green]. "But I also see them leave and it makes me happy to see them better. I understand we are here to help people, and it is up to us to do our best and support our parents." →

The Africa Mercy's latest berth, on the ragged edge of Freetown, is highly precarious. Despite huge overseas assistance — Britain's contribution amounts to almost £1 billion in the past decade — civil society here has disintegrated. Hospitals are decrepit, barely propped up by international NGOs. Thousands live in squalid shacks, spilling sewage into the sea through open channels. Even the docks, where hessian sacks of cassava and rice rot on the sweltering quayside, are a testament to a failed state ravaged by decades of war. When the ship arrived in March, an elderly man died and 12 people were injured in the stampede for free treatment.



"I don't do this for the praise and gratitude of others. I care for these patients because they have value," he tells me. "In this job, I have to prefer others above myself, and I do. Some people may not understand how I can bring my children up on a boat off the west coast of Africa, but they have a full life here and a wonderful education. There are 50 children on board and, sure, they live in a bubble, but they are with their parents and are all remarkable and balanced individuals."

Parker has seen local children mutilated by rebels, and others outcast because of such disfiguring but treatable conditions as cleft palates. He is a world expert on head and facial injuries caused in war. He has patched up children who have had initials of a rebel organisation carved into their flesh, while

The first Mercy ship was launched in 1982 by Texan Christians Don and Deyon Stephens, who transformed Victoria, a retired ocean-going liner, into a state-of-the-art clinic. The charity has since sent four ships — all but one retired — into some of the worst trouble zones, including Haiti, Liberia and the Ivory Coast.

The idea behind the project is simple: to create "islands" of care off the coast of some of the world's most desperately poor countries — beyond the reach of corrupt officials looking to plunder equipment. Today, with patrons and benefactors such as Richard Branson and John Major, Mercy Ships has become a global charity.

The ship depends entirely on volunteers, with a rotating core of 1,000 crew and 2,000 volunteers from more than 40 nations, including surgeons, dentists, nurses, mechanics and school teachers, all of whom pay up to £300 a month for the privilege of living and working on board. The charity has a strong Christian ethos — at the ship's entrance you encounter a framed prayer, Isaiah 60:18: "No longer will violence be heard in your land, nor ruin or destruction within your borders, but you will call your walls Salvation and your gates Praise." In the background the tinkle of piano keys floats across the deck as youthful volunteers gather in the cafeteria to sing the latest gospel hymns. Sex outside marriage, alcohol and drugs are banned. Along the ship's corridors, maxofacial surgeons and volunteer eye consultants are quietly at work. The annals of the Mercy Ships are filled with poignant stories of lives transformed by simple surgery, some of which would take a mere 10 minutes in a typical modern western hospital.

## A NOTICE WARNS 'DON'T FLAUNT SIGNS OF WEALTH'. THOUGH THE BIGGEST THREAT TO LIFE IS NOT ROBBERY BUT VIRULENT CEREBRAL MALARIA



Alfred Sossou, from Benin, now 14, was 10 when a tumour appeared on his jaw that grew to weigh 5lb and consumed his lower teeth. He could eat only by stuffing food down a gap between the tumour and roof of his mouth. Eventually the neoplasm would have suffocated him, were it not for the intervention of Dr Gary Parker, the chief medical officer — a legend among surgeons and the inspirational hub of the ship.

Parker was studying medicine at UCLA in his home state of California when he decided he didn't want to go into private practice, and opted to work for the NHS at Ysbyty Glan Clwyd in Rhyl. After five years in Wales, he went to the coast of Mexico for a six-month stint on board a Mercy Ship and never looked back. He lives with his wife, Susan, and two children in two small cabins, while she teaches Latin to the floating classroom's pupils.

Despite working a 70- to 80-hour week he has no house, no car, no life savings and no pension.

members of the same outfit are in nearby beds.

Perhaps surprisingly, the issue Dr Parker is most reluctant to discuss is his faith. "Of the people on this boat, 90% are committed followers of Christ," he says, almost apologetically. "Perhaps 10% aren't, but most of the surgery we carry out here in Sierra Leone is on Muslim patients. Our core values are Christian but we are not here to proselytise. We are here to save lives." On his office wall is a small oil painting of a surgeon at work with Jesus standing over his shoulder, his hand guiding the doctor's.

A chalked notice on the Africa Mercy's dock warns in bold letters: "Don't flaunt signs of wealth", with a caution to those who live on the ship, if they go to Freetown, not to wear expensive watches or carry iPods or flashy mobile phones. It is smart advice, even if its starkness is a little insensitive. Here in the sweltering harbour, however, the biggest threat to life is not robbery but a virulent strain of cerebral malaria, resistant to mefloquine, which is now on the offensive.

Over the past few years a number of British families have become fixtures on board. Olly and Sally Peet — with their children, Noah, 11, Anna, 9, and Libby, 6 — have served with Mercy Ships for nearly eight years, with the support of Stopstep Baptist Church near Luton. They returned home in July, but Olly had been responsible for the ship's fleet of 28 vehicles as well as the dive team, which keeps the ship's water-cooling vents clear in the port's murky waters. Sally served as a



In Freetown 3,000 people queue for mass screening; not all can be saved. Top left: the Cairncross family have lived aboard Africa Mercy (below left) since 2007

speech therapist. At the time, before leaving the ship, they were not without regrets. "I'm not going to deny that it's challenging. But the kids have loved it here. They've had very full lives. The school is marvellous, they form incredible bonds of friendship with other kids, and they get to see the world. They are learning languages — a bit of French, Dutch and German — from hearing them spoken. Noah loves being in a small group and has been learning lots of interesting things in class. He's grown cultures in the pathology labs and has seen how the ship's engine room works."

The school is perhaps the most unusual in Africa. With 50 youngsters aged between one and 18, the key challenge is not encouraging them to learn but filling their free time, since they are all largely quarantined to the ship and quayside. For 14-year-old Rachel Cairncross, her sister Iona, 12, and brother, Nathaniel, 8, from Gateshead, the claustrophobia on the ship can be intense. They have lived on the Africa Mercy since 2007 (their father, Rob, is operations director, and mother, Anne, a former midwife, is in human resources).

"It's tough not being able to run outside and be as free as we might be at home, but we all bond and are one big family," Rachel says. "The hardest thing is forming friendships, and then your friends leave. We build close relationships quickly and this makes goodbyes very tough." Her mother says she is "incredibly proud" of her children's resilience. "They get to go on field trips and see some of Africa, so that is compensation. Their lives really are a great adventure."

One of the biggest patrons of Mercy Ships is Ann Gloag, the Scottish Stagecoach millionaire. She decided to back the project when she saw how much aid was wasted. "My previous experience of building hospitals in Africa was that you take in 5,000 blankets and three weeks later there are none," she said. "If you take specialist equipment then find it taken, that can be dispiriting. This way you know you've got electricity, water, you know your stuff's not going to be stolen. You know exactly where the money's going."

Like neighbouring Guinea and Liberia, modern-day Sierra Leone is, in many ways, reverting to

the west Africa of the Victorian atlas. Today, as before, the region consists of a series of coastal trading posts, such as Freetown, Monrovia and Conakry, and an interior that, owing to volatility and disease, is again becoming, as Graham Greene once observed, "blank" and "unexplored".

It is from here that the afflicted come in their thousands for the public screenings held by Africa Mercy. One of the most disturbing encounters is noma, a gangrenous disease in children that starts with a simple ulcer and bleeding in the mouth. If nothing is done, the condition spreads quickly, rotting the cheeks and forming a black scab. When the scab falls away, it takes with it the flesh, leaving the jawbone exposed. The disease hasn't been recorded in mainland Europe since the second world war, when it was found in children liberated from concentration camps.

Today noma strikes more than 100,000 children a year. Most die as it destroys their faces and their ability to eat — and yet antibiotics and antiseptics can check the disease if administered early enough, backed up with nutritional

supplementation. The exact cause is unknown but it is thought to be a bacterium, or fusospirochetal organism that preys on severely malnourished children between the ages of two and six who live in unsanitary conditions.

**I**n Namina Yillah's case the arrival of the Africa Mercy in Freetown came too late to prevent half her face being eaten away. The shanty town where five-year-old Namina was born is a typical breeding ground for the condition. The corrugated metal shacks and scabrous walls of the slum are coated with black slime. The streets where the youngster plays are one long puddle of floating garbage. Children with protruding bellies are as numerous as the long thin rats that plague the nearby shore in Lungi beach.

According to her mother, Namina woke up with blood in her mouth shortly after her third birthday. Within a few weeks half her face had slid off, leaving a gaping hole that exposed her jaw. Until the Africa Mercy arrived, the only solution was to use towels to hold it together.

She is now being treated by Dr Parker's team, which is painstakingly reconstructing her face. "There's no point talking about a war against noma," he says. "There needs to be a war against poverty. Noma is one of the most misunderstood diseases we have to cope with. Because it looks so horrific the children suffering from it are cast out and treated like they are cursed. They're forced to live like vampires, foraging at night for food because they cannot come out during the day or are hidden away by their own families who are terrified what their neighbours will do. Often the first time these poor children have seen daylight in years is when they come out for our public screenings. This is why our work here is so important. It's as if we are rescuing these people from the curse of the night. We are allowing them to walk in the daylight again, giving them their face and their humanity back."

Even after witnessing operations on board, the horror of the screening process in a building close to the UN compound in central Freetown comes as a jolt. Soaked in the unforgiving glare of sunlight, the afflicted, some with tumours the size of footballs, present themselves: an arm extended, a leg held up. The queue is 3,000-strong. Along the line, children with horrific burns and eye tumours are thrust towards me. A one-year-old with meningitis weeps in agony, her scalp so swollen her eyelids cannot close. A young man, his hands amputated by a rebel machete during the war, pleads with me to help. His stumps are rotting. I can't resist the thought: how does he urinate or, if he has children, lift them? Everywhere there is terminal neglect of wounds



Left: the ship has six operating theatres to treat patients such as the man disfigured by a lymphoma (below)

and weeping facial tumours. Some are wrapped in leaves and clay, others in blood-soaked towels.

"Can you imagine one bucket and one bar of soap on each ward of 40 patients for all the nurses and caretakers to wash their hands? Can you imagine how hard it is to keep the linen and beds clean? Can you imagine how hard it is to clean up after sick children? Can you imagine working in a hospital where water rarely comes out of the tap? That is why the ship is here," I'm told by Sandra Lako, a Mercy

hardship. That's the truth we face. We cannot save everyone. The need is simply too great."

Bala Koromo had heard of "miracles" being carried out at the harbourside in Freetown. Desperate for a lifeline, she carried the flailing body of her three-year-old daughter, Zainab, to the gangplank. The child had developed cancer in a form that British specialists probably haven't seen in the best part of half a century. In the past year a tumour had burst through the infant's skull and grown as large as her head. Looking like the wilted crown of a cauliflower, the malignant cyst was strangling her to death.

Zainab's cancer had gone undetected until it was much too late — there are no CT scanners and only one private hospital offering chemotherapy drug treatment in all of Sierra Leone. Wailing in the local Krio dialect, a hybrid of broken English and old slave creole, Bala pleaded with the Mercy

## 'WE ARE RESCUING THEM FROM THE CURSE OF THE NIGHT, ALLOWING THEM TO WALK IN THE LIGHT, GIVING THEM THEIR FACE AND THEIR HUMANITY BACK'

Ships doctor, who now lives in Sierra Leone.

Her story is amazing, but not unusual. She was raised on board and attended the school. Later, she emulated the surgeons she admired as a child by becoming a doctor. I am told that most youngsters brought up on the boat return. "The hardest thing about being here is the look in people's eyes when you say you can't help them," says Sandra. "We can only take on the most severe cases, so many will return to their villages and continue to endure terrible pain and

staff to be allowed on board to find a cure for Zainab. Instead she was taken to Harriet Molyneux, a nurse with the most difficult job on the ship: helping locals come to terms with death.

"There is an unspoken philosophy here that says if you are already dying you are past saving. That there are other people you can spend time on and save," says Harriet, a palliative-care nurse from Leeds. When I meet Harriet, Zainab is in her pale freckled arms. The child contorts in agony and the stench that surrounds us is hard to place until I realise it is coming from the grapefruit-sized tumour, which is taking control of her body. Until recently the child's wound was wrapped in leaves and infested with maggots.

"Zainab was brought to us to be cured, to be saved, but all I can do now is help her die with more dignity. We had to turn her away, she was beyond medical care, but I am still here. I'm not here to pray over her or save her. I am here to help her mother understand what is coming." ■



To hear why Dan McDougall is still haunted by his trip to Sierra Leone, visit [thesundaytimes.co.uk/mercyships](http://thesundaytimes.co.uk/mercyships)