

‘Chechomeel’ to Africa, and all of its wonders

Roberto Leon

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The South African Airways 747 circled Cape Town, all its splendor and natural beauty. I could see the Cape of Good Hope, Table Mountain, Robben Island and some spectacular rugged coastlines and beautiful mountains. I was about to begin my 10-year adventure in South Africa, a fascinating country with an amazing contrast of cultures, wealth and poverty.

This was 1982, in the middle of the apartheid era, where your race dictated which hospital you could go to, and where you could live.

I was arriving to start a job as an intern at Edendale Hospital in the province of Natal, now called KwaZulu-Natal.

After landing, the immigration officer at the Cape Town international airport asked me if I was “European.”

“No, I am South American.”

He looked at me with an odd expression and repeated the question. I reiterated my answer.

Unbeknown to me, he was asking me for my race classification. I didn’t know “European” was synonymous with “white” in South Africa.

Apparently, there were 12 race categories (European, coloured, zulu, xhosa and so on). And he had to assign me to one. South American was not one of them.

After he asked me for my profession, he assigned me to race No. 1: European. As a consequence of that, I lived in “whites-only” areas.

Pietermaritzburg was and still is the capital city of KwaZulu-Natal. It is located an hour inland from the metropolis of Durban and its stunning Indian Ocean beaches, and an easy drive to the magnificent Drakensberg mountains. It was often referred as a “sleepy hollow,” although the head of the chamber of commerce called it the “sleeping giant.” The population was about 250,000.

After a two-hour flight from Cape Town, I was greeted by the medical superintendent of Edendale Hospital, my new home.

Edendale was a rather large hospital that catered to the needs of Zulu people, with about 1,000 beds (compared to about 700 beds for the Kelowna General Hospital). The superintendent was a very friendly fellow wearing a white safari suit. He took me to the doctors’ quarters, a series of single dorm rooms, where I could stay during my

internship.

For the interns, there was a swimming pool, squash and tennis courts and a pub called Easy Rider's, the place for socializing after hours since Pietermaritzburg was 35 km away. I remember noticing a banner at the pub that advertised for the annual hospital ball, the "rat race." I was informed that heavy betting was placed on several rats of different colours, with the profits donated to the hospital.

I started to wonder if I was in the right place.

I went to work the next day smartly dressed, to the laughter of my colleague interns, who wore shorts and T-shirts. There were a lot of foreign doctors with heavily accented English, mostly from England and Australia, as well as local Zulu and white South Africans. The atmosphere was enthralling, with lot of patient activity having the most incredible diseases and traumas.

The most challenging cases were stabbed hearts, which appeared to occur more frequently after payday at the end of month. There were about 10,000 babies delivered in a year (compared to 1,600 at KGH). If any hospital ward was full, they would get two patients to share a bed, or put a mattress on the floor in between beds. The expression "lack of beds" did not exist.

Most patients did not speak English, but isiZulu. Shortened to Zulu, it is a very strong language with a lot of clicks. I learned to speak it, but just the basic medical history. To my surprise, most people did not know their age.

The first patient I saw was an old gentleman whose name I cannot remember.

"How old are you?" I asked.

He immediately turned to the RN (called "sister") who acted as a translator. They talked for about five minutes, and then the sister turned back to me and said: "he doesn't know."

I asked her why it took them so long to find out, and she explained that most people don't know their birthdays or ages, and they were trying to figure it out if he was born before or after a big mosquito epidemic which took place about 1930.

They could not come to a conclusion.

In his chart, the date of birth was 01/01/1900. I soon noted that everybody had the same date of birth, Jan. 1, 1900, so I never asked that question again.

After an exhausting but exhilarating day at work, I went to have dinner at the cafeteria. In the centre of the dining room, there was a long table where most of the interns sat, ate and threw food at each other and had a lot of fun. But I wanted to be alone, to reflect

on the day, so I sat at a small table by myself.

A Zulu physician came and sat next to me.

“Chechomeel,” he said. “Roberto Leon,” was my instant and logical reply. He didn’t say a word throughout the dinner, and neither did I.

The next day, he came to sit next to me again, raised his glass, and repeated again what sounded like “Chechomeel.”

Of course, I answered, “Roberto Leon.”

The following night, we went through the same routine.

Following that, I asked the waiter why Zulu people introduce themselves every night. He said: “no man, you got it wrong. He is saying cheers, enjoy your meal. He comes from a remote area of KwaZulu and his accent is quite thick.”

The next day I prepared a surprise for my friend. As soon as he sat down — and before he could say anything — I raised my glass, proudly proposed a toast and said “cheers, enjoy your meal” in my best English. He looked surprised, then raised his glass, gave me a smile, and said “Roberto Leon.”

And that was the end my first week. I learned so much about South Africa, and the people who lived there. I thoroughly enjoyed the rest of my 10 years in the dark continent. I have many more stories to tell you about it.

Dr. Roberto Leon is a Kelowna-based gynecologist who has delivered 10,000 babies (at least) over 35 years. Learn more at drleon.ca.