

February 1965

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Recommended Citation

Kattus, Albert A. (1965) "A Talk With a Free Lance Mission Doctor in Chile ...," *The Linacre Quarterly*: Vol. 32 : No. 1 , Article 9.
Available at: <http://epublications.marquette.edu/lnq/vol32/iss1/9>

A Talk With a Free Lance Mission Doctor in Chile

ALBERT A. KATTUS, M.D.

When the Catholic Physicians' Guild of Los Angeles voted to undertake the foundation and support of the Mission Doctors' Association in 1959 it also made the wise decision to link this effort with the Lay Mission Helpers, then under the direction of the late Monsignor Anthony Brouwers. The Lay Mission Helpers was a flourishing organization sending teams of volunteer lay people of varying occupations and skills into the Mission fields where they could devote their talents to the service of their less fortunate fellow men and to the Lord. One of the firm policies of LMH formulated by Monsignor Brouwers was that each volunteer must undergo a one year period of preparation and training before leaving for the missions. The training consisted of language instruction, familiarization with the geographic and climatic conditions as well as the customs and traits of the people of the destination country, and above all, a strong spiritual orientation as foundation for the labors ahead.

The measure of just how wise a decision the Guild had made in linking the Mission Doctors with the Lay Mission Helpers became very clear to me a few months ago through a chance encounter with a free lance mission doctor in the city of Valdivia, Chile. I was traveling with two colleagues on a medical postgraduate teaching tour in a cooperative endeavor between our school, UCLA, and the two medical schools of Santiago, Chile: the University of Chile, and the Catholic University of Chile. Valdivia was the third stop on the tour. We had landed

in Santiago; visited the Universities there; then, made the long uncomfortable train ride south to Puerto Montt in the company of three Chilean faculty members from the Catholic University.

The train ride, with shared discomfort and the methods we used to alleviate our sufferings, soon made the international teaching team six firm friends. The diner was handy and the food delicious, unquestionably enhanced by the superb local wines available on the train in great abundance. Our English-speaking Chilean colleagues were accomplished wine connoisseurs and they saw to it that our pains were minimized on the trip. They took it upon themselves to see to our education in Chilean affairs and, as we progressed southward through lush agricultural districts, Andean mountain vistas, volcano and lake districts, we were informed about the geographic, agricultural, economic and political problems besetting their country.

Here, then, were three U.S. doctors traveling through the heart of Chile; learning about the country from three keenly perceptive Chilean doctors who had already become the American doctors' fast friends—international relations at their best: a group of people communicating freely in terms that all could understand, in a relaxed atmosphere, with no axes to grind. Before we reached Puerto Montt, we had knowledge of some of the basic fundamentals of Chile's problems.

Looming above all other matters of concern at that moment was the political campaign being waged between

Eduardo Frei, reform-minded Christian Democrat, (whose policies were said to have been formulated from the Papal Encyclicals) and Salvador Allende, avowed Marxist. Chile, the staid, old, non-violent, non-militaristic citadel of Latin American democracy was standing face to face with the dismaying prospect that a Castro-type government might be elected to power by a free vote of the people. That seemed unthinkable for long-stable Chile, but, indeed, entirely possible in the view of our traveling companions. How could it be possible? Because of the poor, the poor people of Chile, indeed the omnipresent poor all over South America. These people are no longer "part of the landscape," taken for granted as part of life. In this country, they have become voters, a potent force.

Though apprehensive, our Chilean friends did not really think that Allende could be elected because the country was making giant strides toward solving difficult social problems without resorting to a Marxist solution. One of the major problems, the housing of the vast numbers of poor, was well on its way to solution. The housing program of Chile was indeed impressive. Everywhere one sees huge housing developments, many completed, some under construction. These, we were informed, are built under a unified cooperative financial plan, which involves minimal cost to the government, and permits long term, low interest-rate financing, thus bringing decent housing within reach of most wage earners. It was just such a housing development in Valdivia that brought Dr. Don Strobe, his wife, Vi, and their four children from Ohio to Chile.*

*The names of the doctor and his family have been changed to save them from embarrassment.

We had driven from Puerto Montt to Valdivia, and I first encountered Don at the John F. Kennedy Hospital in Valdivia. This hospital, of prefabricated design, was rushed down there by the U.S. government after the great earthquake of 1960, when virtually all hospital beds in the city were destroyed. It was now serving as the Social Security Hospital for the wage earners and the poor of the city, and it was painfully overcrowded to the point of having 2 children in most of the pediatric beds. Don was working part time on the Pediatric service, and he faithfully attended all our rounds, lectures and conferences. I didn't have much time to talk to him around the hospital, but in a brief chat I found out that he was not in the Peace Corps, nor in PAVLA, nor with the YMCA, but that a group of "Padres" had somehow persuaded him to come.

I met Don and his charming wife, Vi, at Mass that Sunday in the temporary cathedral of Valdivia, which is a corrugated iron garage-like structure standing beside the ruins of the destroyed church. We agreed that I would visit their home that night after returning from the boat ride on the river that the Kennedy Hospital doctors had arranged for the visiting "gringos."

It was extremely dark and was pouring rain when Don picked me up at the Hotel in a taxi. He has no car of his own. As we drove the five miles out to the edge of town he told me how he had happened to come to Valdivia. He had been working in a general practice partnership with two other physicians in his home town in Ohio when discussions ensued with the community of priests operating the local college, Don's alma mater. They told him how a group of their men had gone to Valdivia, Chile, to help ease the shortage of priests there, and to assist in the rebuilding after the earth-

quake of 1960. They had set up a church in one of the vast new housing projects that was sheltering 40,000 poor people on the outskirts of the city. Now that these 40,000 souls had spiritual guidance the next problem was to obtain medical care; none was at hand, and indeed, most were too poor to afford the bus fare to the hospital in town. The priests were looking for a doctor to go to Chile to help these people, and they wanted to know if Don would be willing to undertake the task, but he would make no decision without consulting his wife.

Don and Vi had thought deeply about the problem, and they discussed it thoroughly. The three man partnership was going well. They were making a comfortable living. They had a nice home, and had managed to put aside some savings. Both of them had begun to feel that the Lord had been unusually good to them, and it was time to give something of themselves in return. The plea of the "Padres" for medical help at their mission in Chile appeared to be a call that could not be refused. They agreed to go.

As we drove through the rain Don pointed out the housing project or *pabellon* that was his clinic. All I could see was a massive cluster of lights reflected in the wet night. Soon we arrived at the house where Don and his family lived. They were renting the back few rooms of a large old frame house that had long since fallen into decay. The interior fulfilled the gloomy prediction of the exterior. Bare electric light bulbs illuminated three starkly utilitarian rooms on the first floor and three bedrooms above. There was a dining room containing a plain wooden table with two wooden benches. The living room had to serve mainly as a play room for the three little boys and a girl because the incessant rain kept them indoors so much of the time. The most luxurious

item of furniture in this room was an old folding lawn chair with a canvas seat. There were no rugs or carpeting anywhere. I tried to imagine how much of a shock it must have been for these inhabitants of a comfortable American suburbia to be thrust into this substandard housing devoid of all the creature comforts which we take so much for granted.

Vi had gone to special pains to obtain a piece of beef for the occasion, and she had sliced it into steaks for us. While we ate and had a bottle of good red wine, Don and I told me about how they had reached there and how events had developed after 6 months.

After they had decided to answer the plea of the priests, they had investigated some of the lay mission agencies in order to obtain some support for their venture. They had contacted the Mission Doctors Association, among others. Because of the nine months to a year training period required before leaving the country, Don and Vi, in their impatience to get going, decided not to affiliate; but to take off on their own.

They traveled at their own expense and were now living on their savings and on the small income that the partnership was willing to provide during Don's absence from practice. There was also hope that he might receive some small reimbursement from the Chilean Social Security officials for his part time work at the Kennedy Hospital, but nothing had been forthcoming. They had agreed to come for 2 years, but now, after 6 months, they were disconsolate and discouraged about the undertaking.

"I don't know if I'll be able to stay for 2 years," was Don's comment. Vi said, "I wish now that we had taken the training in the Mission Doctors program. We'd have been much better prepared to face things here, both from a spiritual and practical point of

view." So these courageous, lonely young people spoke of their frustrations to the stranger from their homeland, seeking solace in the mere recitation of the many disappointments and unforeseen problems that had somehow dampened their missionary ardor.

Vi found the language barrier a formidable problem not only impeding shopping and bus riding, but in dealings with service and sales people there was difficulty, and social contacts which could make life more pleasant were limited. Then, too, she felt that this barrier interfered with her capacity to help her husband with many of the socio-medical problems that beset him. Her major lament was for their lack of spiritual formation that would have helped them tap the spiritual wellsprings which are many times the missionary's greatest resource.

Don tried to sum up the reason for his discouragement when he said, "It just doesn't seem like we're accomplishing anything." This remark was weighted with his sense of the enormity of the medical problems and the futility of trying to deal with them in terms of modern scientific medical practice. "What do you do when four out of a family of 10 children come in with profound diarrhea? There's no lab for culturing stools and we probably wouldn't have the proper antibiotics to give even if we knew the organism. What do you do when the hospital pediatric wards have two children in every bed? How do you face it day after day when you can't see any hope of improvement?"

It seemed to Don that one of the most frustrating ironies was that he was not dealing with a backward mission devoted to primitive savages. Valdivia is one of the most pleasant cities in the highly civilized country of Chile where political upheaval, violent revolution, and governmental oppression

are unknown; where the traditions of personal freedom and democratic government have long been taken for granted; a country so civilized that ultimately, in its September election it chose the path of Christian Democracy over Marxism. Why should a North American doctor find such frustrations when he tries to practice his profession in this land? Because Chile, in common with most of Latin America, is economically poor, technologically underdeveloped and still struggling to throw off the remains of a feudalistic agricultural system. The national income is low and the expenditures must be made in those areas of development that will lead to the economic growth of the nation. Education, transportation, food, fertilizers and tractors command a higher priority than medical care. The result is that modern scientific medicine with its advanced laboratory and radiological techniques can only be offered in one or two large cities. So Don struggled doing frontier medicine in a country known for its civilization. He felt that he could have stood the deprivations much better if he were working in the African bush, but it "sure was tough to have to get along on so little here in Valdivia."

There wasn't time in that short evening for me to get the whole story in all its details. I came away from my visit with Don and Vi Strobe with a profound sense of admiration for the spiritual zeal that impelled these young Americans to leave their comfortable lives, to change to a drastically lower standard of living, to work in the face of great odds for the love of God and their fellow man. But this encounter also revealed the harsh realities of the depths of discouragement and the problems of morale that soon dampen the zeal of the missionary spirit.

Monsignor Anthony Brouwers was well aware of those harsh realities and morale problems and designed a pro-

gram so lay missionaries might better cope with them. Spiritual formation was the key to his program, but he did not neglect the practical. But that is another story—that story of the valiant and wise priest who gave his life harnessing the power of the laity in the service of his Lord. Suffice it

to say I was most glad that the Mission Doctors Association of Los Angeles had linked their efforts with Monsignor Brouwer's Lay Mission Helper program. A long supporting organization such as the Mission Doctors might well have solved most of Don Strobe's problems.



CATHOLIC INTER-AMERICAN COOPERATION PROGRAM . . .

The National Federation was represented at the second annual Conference of the C.I.C.O.P. (Catholic Inter-American Cooperation Program) held at the Edgewater Beach Hotel, Chicago, Ill., January 27-29. The Medical Mission Committee under the able chairmanship of Joseph E. Grady, M.D. of Detroit has made more than moderate advances in supplying medical personnel and aid to the medical missions, especially in Guatemala. Reverend Louis M. Colonnese, organizing secretary of C.I.C.O.P., was most helpful and gracious in arranging a session that enabled our American doctors to meet and discuss with our Latin American colleagues and key Latin American Bishops our common purpose of medical aid to Latin America. Interested doctors should contact:

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