

EMERGENCY TREATMENT OF UNREST VICTIMS IN THE EASTERN CAPE

A general practitioner reports

I am a General Practitioner in Port Elizabeth who got involved in treating people who were wounded during and after the Langa shootings.

I would like to relate some of the problems which I and other helpers experienced during those weeks. In this way, I hope we can help people and health workers who may find themselves in a similar situation.

The first bit of information on what was going on in the townships I got from one of the workers at the Black Sash Advice Office. This person was on duty on Thursday morning, the 21 March, in the Black Sash Advice Office in Uitenhage.

She phoned me at about lunchtime and told me that there had been terrible shootings in Uitenhage. Together, we decided to go there and see what we could do to help people. That is how I got involved.

Police action before 21 March

Members of the Black Sash had been going to Uitenhage previously to take statements from people who had been maltreated by the police. There were many people who came to make statements. There were some very alarming statements about abuse and wrongful imprisonment of children.

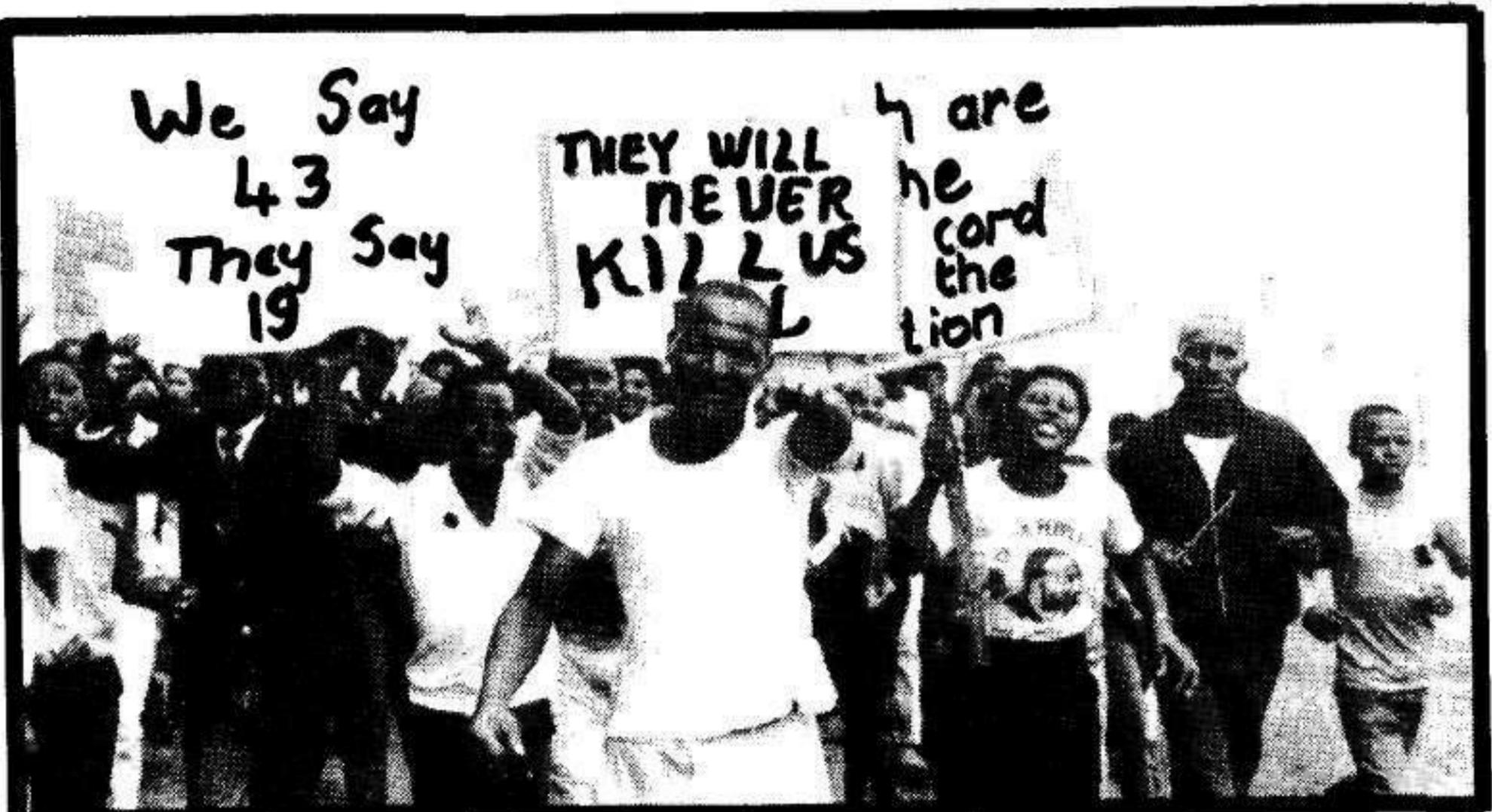
One example of police harassment and ill-treatment was the case of a twelve year-old boy who was standing in the front garden of his parents' house when he was shot in the eyes with buckshot. He lost consciousness. He was taken to one of the black doctors in Kwanobuhle

township. The doctor phoned for an ambulance. Instead, the security police arrived in a vehicle which was not suitable to transport sick or injured persons. Despite that, the police took the young boy to Uitenhage Provincial Hospital, from where he was transferred to Livingstone Hospital. He was lying in Livingstone Hospital with both eyes bandaged, handcuffed to the bed, with two policemen guarding him 24 hours a day.

On the Sunday before the shootings, members of the Black Sash went to the police station in Uitenhage. There they saw a young man handcuffed to the table, and being beaten by two men with sjamboks.

Apart from this incident, one of the Black Sash members noticed that the officer in charge of the police station on that day, Lieutenant Fouche, was smelling of liquor. When she complained about this to the authorities at the police station, she did not get very far. Therefore she made a complaint to the magistrate.

The very same police officer, Lieutenant Fouche, who had smelt of liquor on that day, was in charge of the unit that started the shooting in Langa on 21 March, a few days later.



The death toll

Immediately after the events of March 21, township residents counted 43 people dead. This has become a significant number. Community leaders have insisted on this number, as against the official figure of 19. A recent statement by Mr le Grange reports that a total of 129 people have been killed and 136 injured in the Eastern Cape since the shootings on March 21. The Minister said that 78 people have been killed in the Eastern Cape by the police or other law enforcement agencies, 25 in Port Elizabeth, and 43 in the Uitenhage area. It appears, therefore, that the death toll given by the community leaders is, in fact, the correct one.

Treatment of the victims

After we heard of the Langa shootings, my wife and I decided to go out there. A centre had been set up in the Catholic church; the local priest had offered the presbytery of his church to us. I went out on the Friday afternoon after the shootings, and continued to go there every day for the next week. People came in increasing numbers. The first few days, two to five people came. Towards the middle of the next week, we were dealing with twenty to thirty people in one evening. (I tended to get there around six o' clock in the evening.)

Why people came to the emergency clinic

The question arose as to why these people were coming to the church, where facilities were inadequate, rather than going to the local doctors or to the hospitals.

There were three reasons, as I saw it. One reason was that two black doctors practising in Kwanobuhle township had been ordered by the police not to treat any of the victims. The second reason why people came to the church was the fact that there was a heavy police presence in the hospitals. The third and maybe most important reason was that all people with gunshot wounds who went to the hospitals would automatically be placed under arrest.

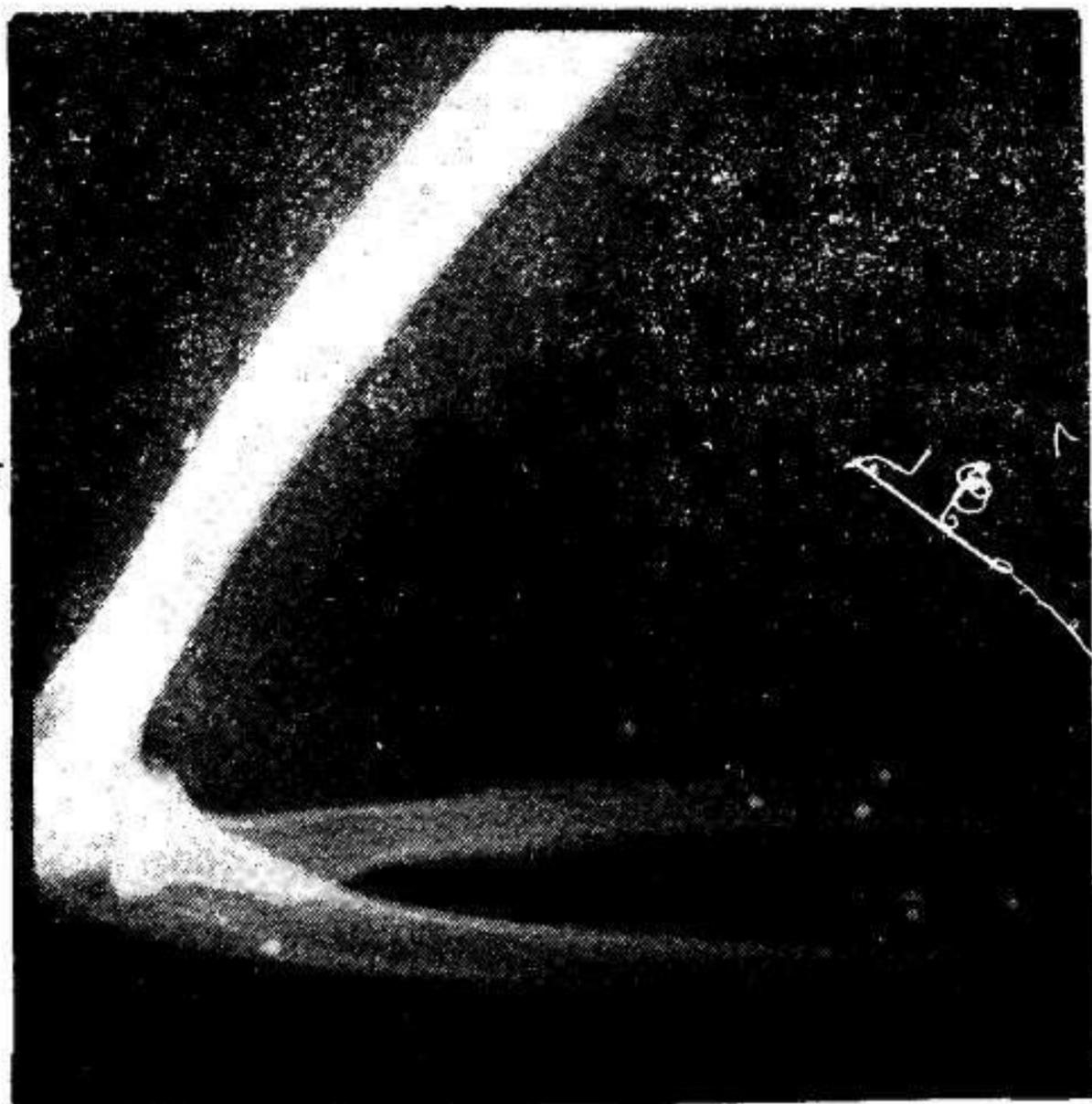
Those who had been able to get away from the shootings on that Thursday had fled into the hills, and there was no way in which they were going to be persuaded to go to the hospitals.

This is why I think people came to the church to be treated. They came in increasing numbers over the following week, not only from Uitenhage, but also from Paterson and Kirkwood, from Fort Beaufort and Adelaide - from everywhere.

Problems in treating injured unrest victims

We encountered many problems in treating unrest victims. Firstly, there was the problem with the premisses. We were making do in the presbytery of the Catholic church. The facilities were inadequate. There was no hot water and nowhere to do dressings. It was a room, but it was better than nothing.

The second problem that I had to face was the fact that, at least for the first two or three days, there was no nursing staff, or any medical help. When one has to treat twenty people with multiple wounds such as these, one does not know where to start. I had no X-ray equipment to find out where the bullets were located.



X-Ray of arm at elbow
showing birdshot

One of the patients whom I saw was a 65 year-old man who had been lying in bed inside his house when buckshot was fired outside. The shots went through the galvanised iron wall of his house, and hit him. Only an X-ray revealed to me that a pellet had lodged in his liver.

Eventually I decided that there was no way in which I could try and remove the bullets in this situation. All I could do was to screen the patients, and give penicillin injections to prevent infections.

It became more and more difficult to cope with all the injured people, as more and more were coming to the church. Some of them came in the early morning, waiting for the doctor to come. They finally got to see the doctor around 5.30 or 6 pm. By that time, many of them were hungry and thirsty.

Police interference in the medical treatment of the victims

Another problem was the continuing police activity in the Eastern Cape townships. On the Saturday following the shootings, I went to the emergency clinic, only to be received by the police. The police was there in full force, including Colonel Strydom, who is head of the Murder and Robbery Squad. He threatened to arrest me and any other practitioners who treated any of the wounded; he alleged that we were "obstructing the course of the law".

Something similar happened to a colleague of mine. On the Thursday following the first shootings, a man was brought to her with a bullet wound. The wound looked like the man had been hit with a panga, it was so big. The wound was a few days old and it looked very unpleasant. People had seen this young man being carried into my colleague's room. Within a very short time, the security police arrived. They demanded that my colleague should hand the patient over to them, so that he could be sent to hospital. She insisted that the patient was not going to the hospital, saying that she did not

believe that he would get the treatment he needed. She was going to send the patient to Saint Joseph's, a private nursing home in Port Elizabeth.

I have already mentioned the heavy police presence in the hospitals. Apart from being "guarded" and placed under arrest, unrest victims in the hospital were often not allowed to receive any visits from family, friends, and concerned people. This was brought out in the press when two clergymen were denied access to Uitenhage Provincial Hospital. One of them was Allan Boesak. He went to see the superintendent of the hospital, requesting to see the hospitalised unrest victims. The superintendent would not allow that. This prohibition was confirmed by the police. The other clergyman then asked the superintendent whether he would be allowed to administer the last rites to dying parishioners in the hospitals. The superintendent's answer was "no".

Detentions

Many, many people were detained during the weeks prior to and after March 21. I would like to highlight some cases which should be of concern to the medical profession.

All but one of the people helping in the Aid Office have been detained and held for questioning. One of the people to be detained is a leader of a local community. He suffers from hypertension and had been hospitalised before for this condition. He was detained for five days. During his time in detention, he received no medication, although his wife had informed the police that he was on treatment. He had a hard time in detention, both physically and mentally.

Another similar case came to my attention. A man came to me shortly after his release from detention. He was held by the police for 36 hours. He was known to be an epileptic. His mother had taken his medication to the police station; one of the policemen said that the medicine was thrown away.

Comments by the Minister of Law and Order

In a recent statement published by the press, the Minister of Law and Order, Mr le Grange, "said he did not believe the Biko affair would be repeated easily... He said that, from an official viewpoint, it was unlikely that the Biko affair would be repeated, as every member of the police force knew he had to abide by standing instructions. Policemen, however, are only human, and human weaknesses would have to be taken into account. ... Referring to the Uitenhage shootings on March 21, Mr le Grange says the fact that tearsmoke was not issued to the units involved, had been a flagrant disregard of very specific instructions. This had disturbed him greatly. But the human factor had to again be taken into consideration."

The Aftermath

For the police in the Eastern Cape, it is business as usual. The police actions, as I have described them for the period before, during, and after March 21, were continued right through the investigations and the hearing of the Kannemeyer Commission.

We will have to develop ways in which to give sympathetic and appropriate treatment to unrest victims under these conditions. This is a matter of urgency, for I believe that incidents of unrest will recur, as the economic, social, and political conditions under which people live, have not changed.