

My Unificationist Memoirs Chapter 92

J. Scharfen
September 23, 2021



Sister Kathy and Chidamoyo Christian Hospital

I recently read that women spend at least \$382 Billion annually on beauty care products. I don't begrudge women their cosmetics, in fact, I deeply appreciate them and enjoy being in the presence of women who care about their appearance. While on a medical service trip to Zimbabwe, I encountered one of our usually well appointed and attractively composed physicians early in the morning without her makeup. I don't want to say I never recovered, but it was a moment of disillusionment. My wife, on the other hand, needs very little makeup to accent her natural beauty and for this I am grateful.

A series of logistical frustrations have drawn me down this path of thought today. I have been attempting to ship desperately needed medical supplies to Chidamoyo Christian Hospital in Zimbabwe. To accomplish this, I must obtain a seaworthy container that can be filled, loaded, shipped to South Africa, then hauled by truck into the backcountry of Zim. However, due to the

dislocations caused by the global COVID pandemic, a worldwide shipping backlog has clogged our seaports, complicated loading and unloading, and made containers nearly impossible to obtain for our small periodic shipping operation--or if available, prohibitively expensive. I had a conversation about our logistical problems several weeks ago with our Congressman, Rep. Mike Thompson, and his response, "everybody is suffering," was not encouraging (more on this below). Which, rather perversely, is why I have been thinking about cosmetics. I wish I had just a fraction of that \$382 Billion. I don't want to be greedy, \$1 Billion would do....



The occasion which brought me together with Representative Thompson was the honoring of Kathy McCarty, the longtime Christian Missionary and Medical Director of Chidamoyo Christian Hospital, with a memorial entry in the US Congressional Record. Sadly, "Sister Kathy" passed away from cancer at the relatively young age of 65. Many of the physicians who had volunteered at her hospital became her caregivers in her final struggle. Though she received exceptional care, her cancer proved too far advanced and she passed away--but not before I awarded her recognition as an Ambassador for Peace, an honor far more significant than the

acknowledgement she received in the halls of Congress.

The daughter of a WWII Marine and an indomitable mother, at 18 years of age, Kathy went to what was then Rhodesia to volunteer for the summer in a small mission clinic in the countryside. At the time, she saw her future as a businesswoman. Her African summer transformed her. Kathy returned home and entered nursing school. She would eventually train at the University of California San Francisco, one of the country's preeminent Nursing programs. After her advanced training in Pediatric Nursing, she cut short her ambitions for a PhD and returned to Chidamoyo to take charge of the hospital, due to the immediate need for her skills. Sister Kathy ran the hospital for 40 years. Her dedication to the people of Zimbabwe was legendary and when she passed, the government of Zimbabwe recognized her as a national hero. In one of my favorite photos of Kathy, she is sporting a shirt emblazoned with the statement "American by Birth, African by the Grace of God."

To say Kathy "ran the hospital for 40 years," simply does not capture the magnitude of her service. Though a Protestant missionary, she lived like a nun, a concept not unfamiliar to her: her aunt on her mother's side of the family was an Ursuline Sister who spent her life dedicated to Christ as a Catholic teacher. To maintain the operations of the hospital required that Kathy raise money, seek the donation of

medical supplies and equipment, while inspiring physicians, nurses, and other healthcare workers from around the world, to pay their own way to Chidamoyo and volunteer their services. In the midst of doing all of this, Kathy had to address the daily health needs of hundreds who came to seek care, manage her staff, and scrounge for everything from pharmaceuticals to bandages to sterile gloves to gowns and masks, and on and on.... Words fail me.



Kathy was beautiful, but she rarely wore makeup. She had no time. Every morning, she would rise early and make breakfast for the visiting medical volunteers staying in her home and adjoining cottages. By 7:00 a.m., she would be at the hospital for the daily morning service consisting of singing in Shona, a scripture reading and short sermon by the Pastor and Hospital Administrator, Major Mereki, prayer, and a closing song. The ambulatory patients would gather along the porticos lining the courtyard and join each and every day.



Without fail, the morning prayer proved to be the calm before the storm. The need in the countryside of Zimbabwe is exceptional, and it seemed to surge in waves against the gates of our rudimentary facility. Expectant mothers, HIV and Tuberculosis patients, children with crocodile bites, horrific tropical infections, cancer, work injuries, Rhino eviscerations (I'm not kidding), and so much more.

The work of the hospital did not only occur within its walls. Several times a week, the staff would load up its diesel jeeps and head out to the surrounding villages for HIV and Tuberculosis outreach and Well Baby Clinics. Though always exhausting, these are my favorite working days. When I am at Chidamoyo, I usually assist in the clinics or teach literature classes at Danadawa, the local high school. But during the village outreach, I feel much more in touch with the living circumstances of the people, giving a physical and cultural context to their health needs. Since the nursing staff has trained me to administer oral vaccines, I am also much more useful. During these forays, I discovered I could have been a pediatrician as I am impervious to the screams of

frightened children.

The HIV and TB outreach that Kathy implemented proved so effective, that the USAID and PEPFAR administrators associated with the American Embassy in Harare, thought that Chidamoyo was not reporting their data as required under the foreign aid agreements. The ambassador at the time was Harry Thomas, a friend of my brother's from their time together on the National Security Council, so I was able to arrange a meeting. Our official reception was initially cool, until the staff learned that Kathy was

indeed reporting--and as regards a statistic of particular concern, the transmission of HIV between mother and child at birth--the number was in fact "0%," as in no transmission of disease. This revelation immediately changed the tenor of the meeting and the staff's skepticism turned to admiration and curiosity: how did Chidamoyo do it?



The marvel of Chidamoyo's village outreach in fact was the subject of research by a Stanford PhD, who sadly passed away from COVID during his travels to Zimbabwe. However, the implications of his work can be seen in the embedded BuzzFeed article, "This Village in Zimbabwe Holds the Key to Ending AIDS."

www.buzzfeednews.com/.../want-to-end-aids-this...

The New York Times covered Kathy's work in Zimbabwe a decade ago. Though time has passed, the video produced by the Times accurately portrays the work at Chidamoyo and captures Kathy's beautiful spirit: World: Providing Medical Services for Peanuts -youtu.be/42OkuEcNjKE

Before dawn, after prayer, I streamed Dr. Yong's Morning Devotion on Facebook (I would prefer to participate on Zoom but my wife has forbidden me to rise before 0400 Pacific Time--for all those who might have noticed my absence). In his sermon, he spoke about the importance of our educational institutions in maintaining the tradition of our True Parents and the momentum of our Unification Movement. As an educator, these words inspired

me. An important part of our educational tradition has been service--nothing is more powerful than experiencing the actual results of "living for the sake of others," as opposed to just talking about the concept in our classrooms. Over the years, I have taken young people (my high school students and university students) to Zimbabwe and Vietnam to participate in service projects. I have repeatedly witnessed my students transformed by the opportunity to step outside of their comfort zones and serve others much less fortunate than themselves.



We should take care to not erect a false dichotomy between evangelization and service. The most powerful means by which to bear witness to the message and mission of our True Parents is to identify the needs of others and to address them. The Catholics have long recognized the role of service in evangelization and established organizations such as Catholic Relief Services, Catholic Charities, and St. Vincent de Paul, to name a few. At the heart of the evangelization effort of the Catholic Church in Vietnam are their clinics in rural areas and the inner cities, staffed by nuns who are physicians, nurses, pharmacists, physician assistants, and natural health practitioners. Under the communist system, they are not allowed to teach religion in their clinics, but every patient knows who is serving them and why.

My hope for the future is that I will be able to connect our members--especially our 2nd Gens--to these service projects in Vietnam and Zimbabwe. I know that our Movement in Korea and Japan has sent medical teams to address healthcare needs in parts of the Developing World. We don't hear enough about these efforts--which is either a failure

to adequately publicize our work or an indication that our footprint remains small and we need to expand our activities. It might be both. Moreover, as we envision our educational future, we should include plans for medical, nursing, and pharmacy schools with programs focused on global health. Dr. Yong spoke this morning about creating world class educational institutions. I am not privy to the institutional goals currently in place, but to not include the health sciences from the outset, would doom our educational institutions to an inferior status before we even began.