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In Torn Liberian Town, Hospital Itself Is a Fatality

By SOMINI SENGUPTA

GANTA, Liberia, July 13 — Since the 1930's, the people of this prosperous border town had come to a stately stone hospital built by American missionaries to deliver their babies, have their eyes examined, and to be treated for everything from malaria to appendicitis to snakebites.

Set among sheltering old trees, across the road from a small church with blue stained-glass windows, Ganta United Methodist Hospital took in patients from all over Liberia's sprawling, rural northeast and from across the river, in Guinea.

Today, the hospital lies in ruins. Its anesthesiology machine is shot up. Grenades have blown off the roof of the eye clinic. The hospital floors are littered with syringes, blue surgical gowns and empty crates that once contained Kalashnikov ammunition.

For three months, as government and rebel forces fought over Ganta, the hospital was turned into a base. It has since been stripped of everything useful — generators, computers, even sterile gauze, surgical clamps and antibiotics.

The government militias that now control this deserted, wasted town blame the rebels, Liberians United for Reconciliation and Democracy, who seized Ganta in late March. By the time they left, three weeks ago, virtually every building in town had been leveled. Among the few left untouched, thanks to the terrible stigma attached to its occupants, is the leper colony around the corner from the hospital.

Accompanied by skinny boy soldiers who blithely crunched over broken bricks and syringes, Dr. Joseph L. Kerkula, a staff physician, came to have a look — his first since fleeing early one Saturday morning in March, when the gunfire began.

His eye clinic was leveled. His house on the hospital grounds, a gift from the Methodist church in the United States, was burned down. His books were reduced to ashes. "You have to put in so much to revive this," Dr. Kerkula said optimistically, as though any revival was possible.

Indeed, reviving the most basic human services in this country will be a mammoth task. As a team of American military experts have heard repeatedly over the last week, a start cannot be made until foreign troops come between the country's warring factions and restore a semblance of order.

"The first requirement here is security," said Cmdr. Chris Clagett, a United States Navy medical doctor on the assessment team.

No one knows when a delicate cease-fire, now two and a half weeks old, will unravel, how violent the consequences will be, or whether West African forces, who have promised to send at least 1,000 troops next week, will get here in time to make a difference.

President Charles G. Taylor refuses to step down until they come. Rebels threaten a fight if he is still here when they arrive. The Bush administration insists that Mr. Taylor, who has been indicted as a war criminal, must leave the country before any American soldiers are sent in. The stalemate has left Liberians terrified.

At the moment, few aid groups, including United Nations agencies, are able to work even in Monrovia, the capital, let alone in far-flung towns like this one. In Monrovia, the World Food Program lost half of its trucks during firefights last month, the American assessment team said. One truck, loaded with food about to be distributed, was emptied, its battery and tires stolen, its radiator shot up. The agency's maintenance compound, where spare parts were kept, was looted.

Ganta, a bustling trading town of 90,000 people near the borders of Guinea and Ivory Coast, was emptied that Saturday morning in March. Rebels advanced from nearby Gbarnga, once the headquarters of Mr. Taylor's own rebel movement, and drove out the poorly equipped government soldiers.

Thousands of townspeople fled and forced their way across a bridge to Guinea, piling whatever they could on their heads, witnesses said. Today, the road to the bridge is littered with their belongings — clothes, sandals, plastic buckets. Witnesses said they dropped everything when rebels began firing in the air.

Josephine Gbayeh, 19, was in that crowd when a rebel soldier grabbed her by the arm and demanded that she serve as his cook. She was saved, she said, only when a Guinean soldier stepped in, pretended to be her brother and persuaded her would-be abductor to let her go. Before her eyes, two small children were trampled by the marauding crowd. Older children jumped off the bridge into the St. John River; she cannot say how many drowned.

This morning, Ms. Gbayeh was sitting on a bench in the wasteland that is downtown Ganta, having her hair braided. Nearby, some civilians sold coconuts and biscuits to the militia boys. Others drifted through the detritus of their homes. By dusk, most would slip back into the bush, or head back to nearby villages. Militiamen now sleep in the hospital.

The last time Dr. Kerkula, an ophthalmologist, was at the hospital, 35 patients were in the wards, some of them fresh out of eye surgery. He hoped they could see well enough to run. "I can't tell you how many died," Dr. Kerkula said. "We were all on the run."

The hospital supervisor carried in his arms a little girl who was awaiting surgery that morning. The chaplain picked up an epileptic girl from her bed. Another doctor was shot in the leg as he tried to run across the bridge.

Dr. Kerkula roamed through the wreckage, pointing out from memory what was what, because it was hard to tell looking at it now: this pile was the waiting room of the eye clinic, he told

visitors, that pile the accountant's office. A skinny boy soldier in a purple basketball jersey followed him around, single-mindedly chewing on a charm necklace. Another picked up a neck brace from the floor and put it on his head, as though it were a crown.

A tiny health clinic more than a two-hour drive away is now the nearest hospital. Dr. Kerkula works there, along with staff members from the now-shuttered Phebe Hospital in nearby Gbarnga.

Phebe has fared better than Ganta, but only because, this time, the fighting did not reach there, said its medical director, Dr. Emmanuel Sandoe. In 1996, during a battle between government troops and what were then Mr. Taylor's guerrilla fighters, the hospital was the site of a famous massacre. All its equipment was looted.

Dr. Sandoe has promised Mr. Taylor's militiamen \$10,000 to guard the place and, so far, they have done so, but not without shooting up a sterilization machine used to make intravenous fluid. (Dr. Sandoe suspects they thought it was a safe.) Next door, a therapeutic feeding center that once nursed starving babies back to health has been stripped of new zinc plates. They can be found on the roof of a shop that a militia leader is building across the street.

For now, Dr. Kerkula and Dr. Sandoe tend to wounded soldiers and babies dying of malaria out of the tiny rural health clinic. Three tents have been set up in its backyard to accommodate the overflow. When it rains, water soaks through. The tent walls are splotted with mildew.

Asleep inside is a 14-year-old girl in diapers. She was pregnant and about to deliver, but by the time her relatives could bring her all the way from Ganta, the baby had fallen so low that it ruptured her vaginal wall. She now suffers from fistula, a debilitating condition that causes urine and feces to leak uncontrollably.