



# The Politics of Ill Health and the Immortality of the African Big Man

By Oby Obyerodhyambo



Ken Odhiambo Okoth, Member of Parliament (MP) for Kibra Constituency in Nairobi, has been in the news a lot over the last few years, mainly because of his stellar performance in his role. From late last year, however, he was 'trending' in the mainstream and social media not because of building a Girls' High school at a cost that fellow MPs claim to use to put up pit latrines in their constituencies, but because he came out and disclosed that he was battling cancer. Granted, Ken is not the first Kenyan politician to disclose affliction by cancer. A few years back, Senator, Beth Mugo boldly disclosed that she had breast cancer and spoke encouragingly of her treatment journey and 'victory'. Kisumu Governor Professor Anyang' Nyongó, has also been public about his prostate cancer illness and treatment. Recently while breaking ground of a Cancer Diagnostic and treatment centre in Kisumu, he self-referenced as among the 'growing cancer statistics'. Yet what makes Ken Okoth's disclosure more significant is its gravity.

Ken Okoth, at forty-one, is among the younger crop of legislators in Kenya. He is not your typical cancer patient since many people still associate cancer with old age. When one is diagnosed with cancer at such a 'young' age, this apparent anomaly becomes the starting point of the conversation. Ken Okoth publicly disclosed that his colorectal cancer had progressed to stage four; meaning that he had no chance of a reversal, or treatment, only clinical management. Okoth was basically announcing that his disease was terminal and that his demise from this disease is imminent. This

announcement is unprecedented in two ways: Okoth is a Kenyan politician and admitting mortality and terminality is a complete *no-no* among Kenya's and indeed Africa's political class. Secondly, as an African, dalliance with death is totally anathema. Denial of the eventuality of death, is deeply wired in our African DNA and psyche, more so in the mental constitution of the African political class.

### **The 'Houdini' Syndrome**

Non-disclosure and denial of ill-health status reaches comic proportions in Africa. In the last thirty years, out of the twenty-one heads of state who have died of illness, eleven died in hospitals abroad. Usually in Europe. One assumes that an individual seeking medical care when and where they can find it is normal. However, the lengths that state machinery goes into denying, lying or explaining the 'disappearance' of politicians when unwell, seeking treatment, or at times has even passed away is simply bizarre.

There was the case of Togolese president, Gnassingbe Eyadama whose office strenuously denied he was ailing until he died in an airplane overflying Tunisian airspace while being rushed abroad for treatment. Then there was Chadian leader, Pascal Yoadimnadjji who died of diabetes related illnesses in Paris as his office was reassuring the public that he was improving and would soon return home. Ghanaian head of state, John Atta Mills' ill-health was a loudly murmured topic. He was 'rumoured' to be suffering from throat cancer. When he died in 2012, he had previously had to deny rumours of his death twice! Even after he died, there were conflicting reports on the cause of his death. Gabonese President, Omar Bongo was reportedly in Barcelona, Spain for a whole month supposedly resting after the "*intense emotional shock*" of losing his wife. Despite stories circulating that he was at an advanced stage of cancer, his office denied and underplayed his illness. Eventually, pressure mounted because the host country media did not play along. His office admitted he was seeking 'routine' medical tests. After two days of denials of leaked information that the leader had died, his office announced his '*sudden death*'. Then there was the president of Nigeria, Umar Musa Yar'Adua, who was reportedly unwell and sought treatment in Saudi Arabia. He disappeared from the public for four months before '*sneaking*' back into the nation's capital under cover of darkness, retreated from public eyes until his death three months later. His illness and cause of death remains a topic for conjecture to date.

In Guinea, President, Lansana Conte had been ailing and going in and out of the country for medical treatment. At one point the editor of a paper printed an unflattering picture of him looking frail. He was promptly arrested and forced to publish an earlier picture showing the leader looking better. Eventually, when he died of '*long illness*', it was announced that he had '*hid his physical suffering from the nation for years because of his dedication to duty*'. There was the case of the Ethiopian leader, Meles Zenawi who was supposedly in a health facility in Belgium for two months during which time rumours of the seriousness of his health, and even death, were stringently denied. When eventually his demise was announced, it was said that he had suddenly contracted an infection. Among the most morbidly hilarious case was of Bingu Wa Mutharika who suffered a massive heart attack at home. The rumour mills were busy churning out stories that he had died, but even as this was happening, he was flown off to a hospital in South Africa where after a few days his death (second death) was announced. Zambian head of state, Levy Mwanawasa suffered a stroke and was hospitalised in Paris. His office denied for almost two months that his condition was grave. Unconfirmed rumours of his death led to the South African parliament observing a minute of silence that was later retracted after much embarrassment. Back at home, there were demands that the state of the leader's health and fitness to continue holding the office be confirmed by independent clinicians. After much prevarication his demise was announced. Ironically, Micheal Sata one among those who had demanded the leader's health be confirmed, would a few years later be in the same predicament and he himself passed away in a London hospital after the standard

denials of ill-health. There is a pathological obsession with secrecy and an official playing of smoke and mirrors game with health of African political leaders as a strategy to subvert democracy by undermining accountability and staving off opposition

### **God Syndrome: Mortality Versus Immortality**

Opacity, in matters health among politicians, even when there are tell-tale signs of frailty is intriguing. The kind of photographs Ken Okoth recently released, shows the image of an individual ravaged by chemotherapy. This reveal, by a Kenyan politician and a sitting MP, viewed together with the self-disclosure of his diagnosis brings onto the public space the issue of mortality and immortality of an African politician. In that respect Ken Okoth's gesture is a first.

Physical infirmity, illness, and death are ultimate equalizers of all mankind. Illness shears away all the pomp and grandeur. Gone are the wailing sirens of chase cars, the coterie of hangers-on and saluting body-guards bullying all and sundry. Illness takes away the guard of honour, the decorated podium and customised lectern. Illness brings a different type of media attention. That which was craved for and adored is avoided and shunned. Politicians instead plead that their privacy be respected. Only sneaked pictures will be seen and not the 'selfies' Ken Okoth provided. The image of an ailing African politician underscores his or her humanity. While this should be obvious, the African politician strives to maintain a demi-god status. Note the names that they have given themselves: *Osagyefo*, *Ngwazi*, *Kuku Ngbendu wa za Banga*, *'Mtukufu'*; the glorious, adored and venerated ones.

This self-deification is by design and a carefully choreographed strategy. Approximation to immortality suggests infallibility, indispensability, omnipotence and omniscience. There is political capital and entitlement in omnipotence because it scares away any opposition or contestation. During the late 1970s, President Kenyatta, old and ailing, began to appear less and less in public. Some politicians around him, began to plot his succession, or rather manipulate his succession to deny his Vice President a direct line to the coveted seat. The Attorney General, Charles Njonjo, who had his own ideas of how the succession should play out, declared that it was treasonous to imagine, think, encompass or utter thoughts surrounding the death of the President. Njonjo, cobbled up some constitutional interpretation that made *imagination* treasonous and by so doing rendered the ailing Kenyatta immortal. It was not only that one could not voice thoughts about his demise, it was treachery to even think he could die!

A few years before this, the renowned South African cardiologist, Dr. Christian Barnard had visited the country and though the state sought to treat his visit as some innocuous touristic event with no significance, rumours went around that he was in Kenya to examine Mzee's heart. At no point was the public briefed on the prognosis of their president's health. The culture of mystique and secrecy surrounding the life and health of the leader was carefully orchestrated to stave off any opposition. If a leader is deemed to be mortal, then it is fair game to challenge them. Njonjo was able to use this interpretation of the constitution to effectively scuttle Moi's opponents and when Mzee died in 1978 he comfortably rose to presidency.

It is no wonder that during Moi's twenty-four-year tenure he never 'fell ill'. The health of the president never came into the public domain. As Moi's reign rolled out, and multi-party politics was re-introduced, he faced more challenges than his predecessor, but his health remained a well-managed secret. The deification continued with 'praise songs' such as *'Tawala Kenya Tawala'* and *'Fimbo ya Nyayo'* composed and sung to serenade him. Today, retired President Moi is nearing a century, he is not in the best of health. Retired President Kibaki is 87 years old, and after his well-documented accident, his health status is left to speculation and rumours. Once in a while there will be unconfirmed reports of sightings of these elder statesmen at hospitals, but no official mention.

Even in retirement, the myth of immortality prevails.

In America and UK in contrast the nation is kept very informed about the health of former leaders. When Ronald Reagan was stricken by Alzheimer's disease the public were duly informed, the media gave regular updates on his progress right to the point they broke the news of his demise. George W. Bush battled Parkinson's disease while former President Jimmy Carter managed brain cancer under full public glare. In the UK, Margaret Thatcher's health was widely reported as she battled dementia.

### **The Passing Cloud Syndrome: Indispensability Versus Ephemerality**

Illness is nature's way of reminding us of the transitory, ephemeral nature of life, and with it, the reality that none of us is indispensable. When a bout of illness takes one away from the regular cycle of things, it creates a vacuum, albeit temporary, that must get filled. It matters not how long one is indisposed, but *'life goes on'* and the gap is filled. The constant turning of the wheels of life is a lesson that African politicians loath. The desire to shroud instances when one is indisposed yet systems continue to run stems from the desire to maintain control. The fear of *'looming shadows'* is among the African politician's biggest fear. This is why it is common to hear politicians complaining about *'political tourists'*, a euphemism for potential opponents.

During a presidential campaign speech, President Moi corrupted the Kiswahili proverb, stating that *"Paka akiondoka...atarudi tena"*. Convoluting it to suggest that, when the cats away ...it will surely return. In his utterance he was negating the wisdom that when gaps are created, others fill them up and even thrive. Moi was referring to a period he had travelled out of the country, at a time he had refused to appoint a substantive deputy. There had been questions posed on who was in charge in his absence. Moi, effectively rubbished the idea that anyone was good enough to deputize or replace him.

The notion of indispensability and irreplaceability stems from the merging of an individual's ego and the office they occupy; they conflate themselves and the office and develop a sense of entitlement to it. Colin Powell, the first African American Secretary of State and Chairman of the Joint Chiefs of Staff in his most illuminating primer on leadership, gives tips that African leaders should take to heart. He poignantly says, *'Never let your ego get so close to your position that when your position goes, your ego goes with it'*. Equating oneself to an office is the height of megalomania a problem that has afflicted African politics for ages. Individuals feel entitled to hold offices and take any form of contest personally and not as expression of democratic processes. In Africa, challenging an incumbent is treated as a personal affront not only by the individual but also by the people and the system. The way that opposition politicians are persecuted in almost every corner of Africa is indicative of this. The feeling of personal ownership of political office, is among the biggest challenge to the entrenchment of democracy in Africa. Acknowledgement of mortality as Ken Okoth has done would separate the individual from an office. Only when politicians, eschew personality cults, and accept that offices they occupy are not personal fiefdoms, will they allow the evolution and strengthening of democratic systems and institutions.

### **Mystique Versus Ordinary: The Lwanda Magere Complex**

There is a well-known legend of Lwanda Magere, the mythical Luo warrior. The story goes that the indomitable warrior's body was stone-solid, and during battle enemy spears would simply glance off him. His invincibility in mystical power rendered his body as hard as a rock. The secret of his super-human exploit was a closely guarded secret, but once it was revealed to his enemies by a bride he married from the rival tribe, he was soon vanquished. African politicians have delusions of invincibility upon attainment of the status of *'mheshimiwa'*. In this delusion of super-human status

and invincibility falling ill, admitting to being ill and being in need of medical attention would be akin to conceding that they are indeed human and can be vanquished.

Maintaining this image of invincibility is a strategy to stave off any opposition to their elective positions. To maintain this image, any sign of illness is managed confidentially and an alternative narrative is woven to explain any physical changes or absence. Ken Okoth has provided a very different narrative. He has shown a human side of a politician and everyone is now lining up to secure a selfie with him. In the recent past, there is a tragi-comic case where an ailing politician in London was visited by his family who went on to report that they had even eaten a meal of '*ugali*' with the patient only for the man to die even before the ink had dried on their statement. There was a Governor who was terminally ill and would 'disappear' from his County for extended periods, yet his office would issue official denials that he was ill until he unfortunately passed away.

African politicians understand the art and benefit of mystique well. The African politician does not do ordinary; all efforts are made to demonstrate that they are extra ordinary. Alternatively, America's first black President Obama was the high-priest of ordinary with several every day Joe instances of going about life. African politicians once elected into office, lose even the capability to carry their own cell-phone. They lose the motor-skill ability of opening car-doors or even pulling a seat for themselves. Nothing demonstrates African leader's sense of the mystique than their motorcades. The sheer power-show, in face of the poor citizenry, is supposed to demonstrate the leader's power and invincibility. Ironically, the more the display of power, the more it demonstrates fear and vulnerability. In some countries, the leader's motorcade includes a phalanx of horses and armoured vehicles. The large motor-cades and the heavily armed coterie of bodyguards are a modern day version of the fetishes worn by a '*mganga*' - witch-doctor. The *mganga* wore a human skull, bird feathers, talons and beaks, snake skins and genitalia of reptiles. The African leader uses the same shock-and-awe tactics.

Now picture this politician, once surrounded by all these talismans and paraphernalia of power getting a bout of diarrhoea, syphilis, cholera, shingles, dementia or even diseases more 'prestigious' as Parkinson's, Diabetes or Hypertension. The body ends up racked by aches, coughs and blisters and the management of health results in an emaciated image of their former selves. The myth would be shattered forever; he would be Lwanda Magere whose secret is out and the enemy soldiers would be creeping to spear his shadow. Kenyan politicians are now trooping to be seen paying homage to Ken Okoth whose ordinariness and non-mystique humanity has resonated so powerfully with the public. The writing is out there on the wall for them to read as found in the Book of Daniel: *mene, mene, tekel, Upharsin*. Ken Okoth's celebrity status and popularity is not derived from flaunting of power, portrayed invincibility and omniscience, but from his exemplary service, accountability and honesty.

### **Omniscience Versus Vulnerability**

At that point when illness strips the politician of all semblance of power, their biggest fear comes to the fore; that of placing themselves in the hands of others, admitting that there are others more capable than themselves.

There is nothing as humbling as being asked to strip and step behind an examination curtain, lie down and be subjected to examination. This feeling of vulnerability and helplessness is probably what leads many African political leaders to seek medical treatment abroad - where they are unrecognisable, basically nobody. The thought of being reduced to a normal human being with ailments is probably too much to bear. Some politicians might believe they are not safe being in such a vulnerable condition in a place where they have done so much harm.

There is also the fear that the doctor examining them might be one whose upward mobility has been affected by the poor policies they have passed or failed to pass. It could be a clinician whose working conditions have been compromised by the pilferage of the health budget. The facility could be one whose equipment are sub-standard and supplied with fake drugs because of the corrupt deal they cut during procurement.

This alone justifies running away to seek treatment elsewhere. During his presidency, the deposed Zimbabwean leader Robert Mugabe, would reportedly seek medical treatment in Singapore. He would travel to the South Asian nation to go under the radar for weeks before returning home. In Nigeria, President Muhammadu Buhari has spent long periods in Europe seeking medical treatment for an undisclosed illness. Every time he does so, the trips are shrouded in secrecy even as they are funded by the Nigerian taxpayer.

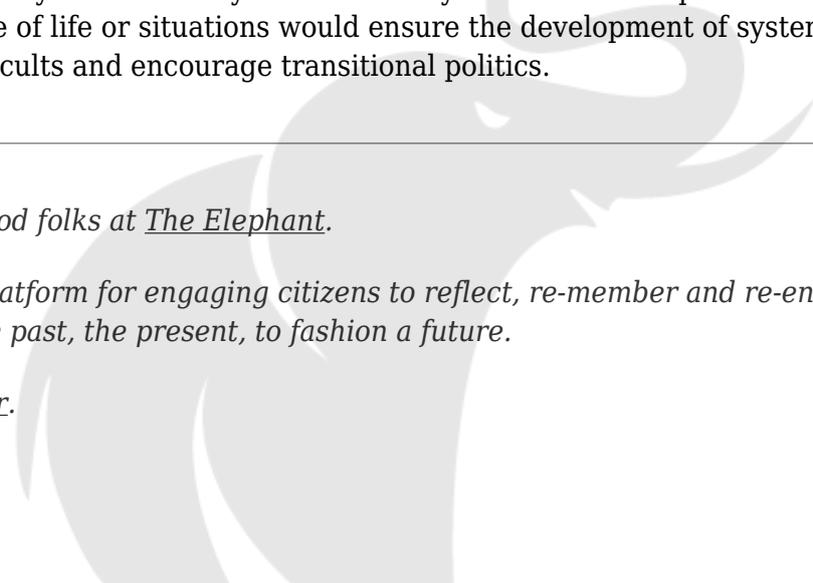
Frail health or illness is not the kind of thing that one would wish another, but there is no other experience that underscores equality, humanity, vulnerability and ephemerality. The problems of democracy in Africa stem from a failure to recognise these basic principles of good governance. An appreciation of equality and fraternity of all humanity would ensure equal treatment. Recognition of the non-permanence of life or situations would ensure the development of systems and institutions and not personality cults and encourage transitional politics.

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