Ebola’s Cultural Casualty: Hugs in Hands-On Liberia

By HELENE COOPER  OCT. 4, 2014

MONROVIA, Liberia — It is hard enough to push away family and friends, shunning an embrace or even a shake of the hand to protect yourself from Ebola.

But imagine trying not to touch your 2-year-old daughter when she is feverish, vomiting blood and in pain.

Precious Diggs, a 33-year-old contractor for a rubber company, had heard all the warnings from the legions of public health workers here in Liberia. She had seen the signs that dot the road from Harbel, where she works, to the capital, Monrovia, some 35 miles away: “Ebola is Here and Real!” they say. “Stop the Denial!”

But when her toddler, Rebecca, started “toileting and vomiting,” there was no way her mother was not going to pick her up.

“Na mind, baby,” Ms. Diggs whispered in her baby’s ear. “I beg you, na mind.”

Here in the heart of the worst Ebola outbreak in history, the question of whether to touch a stranger has only one answer: You don’t. But even in more intimate circles, in families and among lifelong friends, Liberians are starting to pull away from one another, straining against generations of a culture in which closeness is expressed through physical contact.

Liberia — from the elite doyennes who spend their days sending houseboys to the market to fetch oranges for them, all the way to the young boys on Tubman Boulevard who run up to cars hawking plastic bags of ice — used to be a tactile place. Everybody kissed friends, strangers and cousins, regardless of whether people met every day or had not seen one another in 20 years.

In a version of the genteel affectations that freed American slaves brought
with them two centuries ago when they came here, the double-cheek kiss, for decades, was the standard greeting.

People often held hands while singing hymns at First United Methodist Church on Ashmun Street on Sundays, and after services sometimes took up to an hour to disperse, going systematically from cheek to cheek.

At parties in Monrovia, new arrivals went from person to person around a room, taking the hand of each seated guest as they bent down to kiss and chat. Sometimes it could take 15 to 20 minutes to make the rounds at a house party of just 10 people. When it was time to leave, the ritual began again.

That’s all gone now. Ebola is spread through bodily fluids: vomit, blood, feces, tears, saliva and sweat. Close contact has become taboo.

The Liberian government has decreed that taxis — which used to cram in six, seven, eight people, and in a recent case, four goats even — are allowed to take just three people in the back seat: fewer riders to touch one another.

Sylvester Vagn, 40, who was a corporate driver with a tech company before he was laid off a few months ago, said Thursday that even with only two people sharing the taxi with him, he still now jams his body against the door. Whichever arm is closest to his fellow passengers, he places it across his body and practically out the window.

“I sit so, with my head so,” he said, demonstrating how he leans his head as far away as possible. “And I bring jacket.”

Clara K. Mallah, 27, wears long sleeves, pulling them over her hands whenever her 3-year-old niece comes running up to her. Ms. Mallah, a national translator with an international organization in Monrovia, makes an exception only for her 52-year-old mother, a diabetic amputee who never leaves the house. Even so, Ms. Mallah has trepidation.

“If my mom could walk,” she said, “I wouldn’t touch her.”

Those close family ties expose the fragility of the belief that you can completely protect yourself from Ebola by keeping your hands to yourself. Can you really not touch an ailing mother?

Ephraim Dunbar couldn’t. When Mr. Dunbar, 37, got a phone call in late August that his mother had taken ill, he rushed to her house in Dolos Town, the enclave near Harbel where dozens of people have succumbed to Ebola. He found
her in bed, vomiting blood.

His mind went immediately to the precautions against the virus. He did his best not to touch her. But as she grew worse, unable to keep anything down, he gave her milk, and tried to soothe her. His skin touched hers.

His mother died the next day.

Just after his mother’s funeral, Mr. Dunbar’s own forehead got hot with fever. For 15 days, he stayed at John F. Kennedy Hospital in Monrovia, fighting the disease. It was a fight he eventually won. But when he got out of the hospital, he found out that four of his sisters, his brother, his father, his aunt, his uncle and his two nephews had died. His entire family, wiped out in days.

On Friday, Mr. Dunbar said he would do nothing different. “That’s my ma,” he said, “that she the one born me.”

Levy Zeopuegar’s Achilles’ heel was his oldest sister, Neconie — “one father, one mother,” he described her in the Liberian way of distinguishing the special bond of full siblings in a country where half brothers or half sisters are common.

When Neconie got sick, her brother chartered a private car to take her to the hospital and climbed in with her. When the driver pointed out that blood was pooling from her nose, Mr. Zeopuegar turned to her with a towel.

Neconie died. Her husband, also in the car, died. Mr. Zeopuegar almost died as well, spending 19 days in the Ebola treatment unit in Harbel. For days, he hiccupped blood, feeling each day was his last, until finally, one morning, he woke up and knew he would live.

“You have to understand,” he tried to explain. “This Ebola thing. You will see your son or daughter sick in bed and say, ‘I not touching her?’ That is impossible.”

And yet, that is what Liberians must do to combat the virus. On the streets of Monrovia, it sometimes seems impossible. Children still run around in local markets pushing and playing. People in wheelchairs still roll up to cars at red lights, palms outstretched. Boys still push their way through the densely crowded West Point neighborhood.

Many people say they have not felt the warmth of human skin in months. Many do not shake hands or kiss any more. No caressing. No hugging.

But some still do. Sister Barbara Brillant, dean of Mother Patern College of
Health Sciences at St. Theresa’s Convent, last week was driving down the street when she saw a young couple holding hands.

“Stop holding hands!” she yelled out the car window.

“They looked at me like I was crazy,” Sister Barbara said later.

So when 2-year-old Rebecca got sick, Precious Diggs picked her baby up. Rebecca did not make it, and died days later.

She passed Ebola on to her mother.

Weeks later, Ms. Diggs was released from a treatment unit. She sat in front of the discharge tent with a row of eight people, all recovered from the disease, all waiting to walk out into new and starkly different lives.

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