

MMM

Rooted and founded in love



MEDICAL MISSIONARIES of MARY

SUPPLEMENT TO HEALING & DEVELOPMENT — VOLUME 77 — EASTER 2016



We wish all our supporters joy and peace during the Easter season.

A legacy of bringing life



A 'Historic North-South Spring Conference' of the Irish Perinatal Society (IPNS) was held at Our Lady of Lourdes Hospital, Drogheda from 25-26 February. The conference theme was '1916-2016: Making the New Island of Ireland', emphasising topics significant for the healthy growth and development of a child in society. Sr. Ekaete Ekop (left) a consultant obstetrician/gynaecologist, addressed the meeting.

Ms. Jo Berry gave the opening address: 'The Importance of Growing up in Peace'. Daughter of Sir Anthony Berry, MP, who was killed in the IRA bombing in Brighton in 1984, Ms. Berry founded Building Bridges for Peace, which enables divided communities throughout the world to explore and better understand the roots of war, terrorism and violence. It promotes dialogue and mediation as the means to peace.

MMM contributions

Dr. Maire Milner talked about the legacy of the Medical Missionaries of Mary and announced the Inaugural Ann Ward Medal Winning Presentation. Sr. Ann Ward, MMM, was consultant obstetrician/gynaecologist at St. Luke's Hospital, Anua, Nigeria for many years. She received an Award of Merit from the International Federation of Obstetricians and Gynaecologists and the Distinguished Graduate Award from University College Dublin for her 'outstanding contribution in the field of medicine' in relation to obstetric fistula. The medal acknowledges her lifetime's work.



Sr. Ekaete Ekop spoke on 'Perinatal and Maternal Health in Sub-Saharan Africa'. She has had over 20 years' experience in Nigeria and the Republic of Benin, and is now MMM Assistant Congregational Leader. She said that the rural obstetric client in sub-Saharan Africa has a complex socio-cultural context that begs to be understood, not judged or 'corrected'.

Ahead of the times

The probability that a 15-year-old female will eventually die from a maternal cause still varies greatly. For example, the risk in Ireland is 1:1610, while in Nigeria it is 1:22'. Ekaete pointed out that Mother Mary Martin identified the problem before it became a global issue. In 1937 she

founded MMM, setting up a powerful response in sub-Saharan Africa. This was 50 years before Safe Motherhood was launched by the World Health Organization (WHO).

Choosing to be with the under-served, our Sisters and colleagues had to be adaptable and flexible. A great team spirit developed, involving all the staff, including watchmen and drivers. We had a specialty in multi-tasking! Sr. Ekaete said that in respecting local beliefs and often



The new maternity hospital in Drogheda

dealing with resource limitations, we have to balance the ideal with what is possible. We have to ask, 'What does the woman accept? What will keep this mother and baby alive and healthy?'



Passing on skills to staff and mother at Itam

Many women in rural Nigeria have an aversion to Caesarean section, which is, often erroneously, not perceived as a real birth, and to hospital admission. Normal delivery is valued, as is preserving the ability to have children. Often, if we monitor her pregnancy closely, intervening only when necessary, we will win the woman's trust. Using a compassionate approach often results in a better outcome than trying to impose an ideal solution. Otherwise a woman at risk will try to deliver at home, usually with disastrous consequences. There are more than 15,000 new cases of vesico-vaginal fistula (VVF) annually in Nigeria.

Forerunners of good practice

With the pressure to deliver at home and frequent lack of transport, in the 1960s MMM began to provide pre-delivery accommodation for rural women with high-risk pregnancies. This practice has only recently been named by WHO as 'birth preparedness'. For the missionaries, it arose from our experience that it was literally 'do or die'.

Training involved all staff, with on-the-job instruction and widening skills. Some learned to assist at surgery. Nurse aids could recognise emergencies. They, in turn, trained new staff members. How else would a 53-bedded maternity hospital with few qualified staff manage over 3,500 deliveries annually?



Training others ensures that the work continues far beyond our scope. Sr. Ann Ward pioneered the first VVF hospital in Nigeria in the 1980s. Dr. Upuji (RIP), one of her trainees, continued the work after she retired. Prof. Sunday Adeoye, who learned VVF surgery from Sr. Ann, established the only federal government-owned VVF hospital in Nigeria.

Our experience has shown that traditional medical training does not prepare one for rural obstetrics. It is a 'specialty' that is developed painstakingly in the field. Ekaete concluded, 'I hope I have been able to convey something

about maternal and perinatal health in Nigeria from the standpoint of those involved where it matters: the daily heroic efforts and usually unsung commitment of those who live and work and celebrate among the under-served and marginalised.'

¹ WHO, UNICEF, UNFPA, World Bank, and United Nations Population Division. Trends in Maternal Mortality: 1990 to 2015

Editor: Sister Carol Breslin, MMM; Design: Judi Lennon

Photos courtesy of Sisters Celine Anikwem, Joan Grumbach Sylvia Ndubuaku, Ekaete Ekop.

Healing the broken-hearted

(Ps 147:3)



Sister Sylvia Ndubuaku is matron at our hospital in Itam, Nigeria, which along with basic health care, provides repair operations for women with vesico-vaginal fistula (VVF). This condition is most often the result of prolonged and obstructed labour. The woman usually loses her child and is left with incontinence of urine and sometimes faeces. VVF affects about two million women in sub-Saharan Africa and South Asia. Sylvia told us about the lives that were changed in 2015.

‘This year we had four free VVF repair camps instead of two, so we were able to reach many more women. Three media centers, NTA, AKBC, and Radio FM (Atlantic), promoted our services, creating awareness about the causes, treatment and prevention of VVF. Among the many who benefited was a woman who had a VVF for 37 years. She came for the July camp and went home dry. In her great joy she exclaimed, “Indeed there is a God!” She has since referred three more women to us.



Preparing for surgery



A ward in the hospital at Itam

‘We installed a solar energy unit, which greatly helped with work at night and is reducing the huge amount of money spent on diesel. We thank God for our donors, Misan Cara, and those who installed it. We bought an ultrasound scanning machine, saving our patients another journey for this investigation.

‘We faced many challenges. When it rains the road to the hospital becomes impassable for both workers and patients. The buildings in the hospital are old and expensive to maintain.

‘Also, because of a strike by government staff in January we had to hire some nurses, increasing expenses. Before the April camp there was a lot of political instability. Professor Adeoye, from the National Obstetric Fistula Hospital in Abakaliki, and Dr. Lengmang from Jos, our main surgeons, took a risk to come, showing their great love and concern for the patients. They had other delays coming for the July camp. Despite these setbacks, this camp had the highest number of admissions, new cases, and dry/healed women.



A repair operation: a chance for a new life

'We thank all our donors to this ministry, especially Exxon Mobil; the Federal Ministry of Health, Abuja; UNFPA; and the Gay and Keith Talbot Trust. Visitors Dr. Musa, who works with UNFPA in Abuja, and Mr. Musa, the founder of Fistula Foundation in Kano, and his daughter, provided drugs and medical consumables. The state governor's wife sent gifts and money for the patients. We ask God to bless you all!'



This time: a healthy mother and baby

Camps in 2015	Jan	Apr	Jul	Sep	Total
Total women registered	47	43	50	40	180
Total operated on	38	33	33	30	134
Total referred	9	10	17	10	46
Total dry	28	20	27	22	97

This table shows the results of the four VVF camps. Nearly 100 women were healed of fistulae. Nevertheless, as Sr. Ekaete pointed out, there are more than 15,000 new cases in Nigeria every year. In view of the fact that this debilitating condition is preventable, this is unacceptable.

A 'Yes' uttered in faith (MMM Constitutions)



Sister Sekunda with her godparents

On 23 January 2016, MMMs, MMM Associates, family, friends and parishioners gathered to celebrate with Sister Sekunda Kimario as she made her perpetual profession as an MMM. Guests travelled from all over the country and from Nairobi, Kenya to witness the event, which took place in her home parish, Mashati, near Mount Kilimanjaro in Tanzania.

Sekunda's own journey to this moment began in 1998, when she was training as a nurse in Dareda, Tanzania. MMM had started and later handed over the nursing school and hospital there. She wrote, 'I used to hear the staff, teachers and patients talking about MMMs. I wondered who they were. One day, MMMs from Nangwa came to talk to us. What touched me most was the MMM healing charism. This was what I was looking for.'

Sekunda worked in Makiungu Hospital while, as an aspirant, she got to know MMM better and we got to know her. She studied for a Diploma in Nursing and in 2005, began her postulancy in Singida, Tanzania. In 2006 she went to the international novitiate in Nairobi for two years.



'I vow myself to God for my whole life.'



'You will fill me with joy in your presence' (Ps 16:11 NIV).

Work and prayer: a necessary balance

After profession, Sekunda worked in Makiungu and in Kirambi, Rwanda. She then had an opportunity for reflection and deepening her MMM vocation in Benin City, Nigeria. In May 2014, she was back in Tanzania, at our mission in Nangwa, her current assignment.

Sekunda said, 'I work in the dispensary. Our main focus is meeting people in need. We have antenatal and mother and child clinics, with outreach to six villages. We raise awareness about current diseases and deal with malnutrition. We also have an out-patients clinic.'

The community celebrates

This was the first time for Sekunda's parish to host a final profession. MMMs prepared the altar the day before while the parishioners were busy with family training, prayer meetings, and choir practice. Sister Catherine O'Grady, who travelled from Singida, said, 'We could see that the people were very dedicated to their Christian calling. We gave out leaflets to many people who wanted to know more about MMM and how women can join us.'

The day itself dawned bright and sunny after rain all week. Bishop Isaac Massawe arrived and was escorted to the parish house by a brass band, composed of boys and girls from Moshi. Then everyone processed to the church. Two choirs provided great meaning and joy for the ceremony. One was from the parish. The other, from Nangwa, had travelled all night to be on time.



With Sr. Angela Lyapa, Bishop Massawe witnesses Sekunda's profession.

After Mass there were refreshments. Then all proceeded, accompanied by the band, to one of the secondary schools. Sister Catherine commented, 'What had earlier been just a hall was now transformed into a stunning reception area for over 300 people. 'The traditional celebratory "cake", a male goat, had been prepared to start the reception. We then had food and drinks, mixed with congratulatory words, entertainment and dancing. Then it was time to say farewell because many were leaving early in the morning. It was a day to remember in Tanzania and we hope many other women will join MMM as a result.'



MMMs celebrate with Sekunda.

In his homily the bishop said, 'Sekunda took a long time to look around but she could not see anything or anybody to please her other than Jesus.'

Reflecting on that, Sekunda said, 'I pray that Jesus will be my only focus. My dream of being a full member in the Medical Missionaries of Mary has come true.'

'Until we rest in You' (St. Augustine)



Sister Rita Hand, MMM

Sister Rita was born Margaret Hand in Carrickmacross in 1935 and grew up near Dowth, Co. Meath. She joined the Medical Missionaries of Mary in 1953. After profession she trained as a nurse-midwife. Her first assignment was to Angola, where she served for 5 years, followed by 3 years in Naples. After training as a health visitor she went to Kenya in 1978 and spent 12 years there in nursing, community-based health care and in MMM leadership. After 3 years as co-ordinator of the Motherhouse community, she was assigned to Uganda, where she spent a further 12 years in community-based health care and development.

Sister Rita returned to Ireland in 2011 and served in leadership and other duties in the Motherhouse. She moved to the nursing facility, Aras Mhuire in December 2014 for care during a serious illness. She died there peacefully on 4 December 2015.



Sister Myra O'Connell, MMM

Sister Myra was born in Dun Laoghaire, Co. Dublin in 1925 and joined the Medical Missionaries of Mary in 1943. After profession she trained as a nurse-midwife. Her first assignment was to Naples, Italy where she served for 12 years, followed by 2 years in Rome. After training as a nurse tutor she spent 2 years in Malawi teaching in St. John's Hospital in Mzuzu.

In 1978 she was assigned to the USA, where she was to spend the next 37 years. During that time she helped in Winchester, MA for 3 years, worked as a nurse in the infirmary of the Sisters of the Cenacle, and served for 6 years in Somerville, MA in MMM leadership, fund-raising and formation. In 1994 she was assigned to Chicago, where for 12 years she was involved in fund-raising and volunteer work. She returned to Somerville, in 2006 and helped in the community. Because of increasing physical incapacity she moved to the nearby care facility run by the Little Sisters of the Poor. She died there peacefully on 8 December 2015.



Sister Denise Lynch, MMM

Sister Denise was born Philomena Lynch in Scotland in 1932. She worked as a secretary before joining the Medical Missionaries of Mary in 1951. In 1956 she was assigned to Nigeria, where she served for 3 years. Back in Ireland, she worked in administration in the IMTH and completed a diploma in social studies. Returning to Nigeria in 1965, she was a secretary in the Apostolic Delegation in Lagos for 3 years. After completing a BA Degree, Denise was assigned to Tanzania in 1974 and was a secretary in MMM hospitals there. She returned to Ireland in 1978 and was medical administrator in the IMTH for 5 years. She was then medical administrator of St. Mary's Hospital in Eleta, Ibadan, Nigeria for 2 years.

Sister Denise returned to Ireland in 1988 and was pastoral co-ordinator and parish Sister in Booterstown, Dublin. She returned to Tanzania at the end of 1994 and was Diocesan AIDS Task Force Co-ordinator for 7 years. She returned to the MMM Motherhouse and helped part time in the library, and with graphics and card making. She moved to the nursing facility, Aras Mhuire, in December 2015 for care during a serious illness. She died there peacefully on 24 January 2016.



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- Make a donation by mail or online
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- Join us as members of MMM.
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