Healing Development 2019 Edition

MEDICAL Missionaries of Mary



IVI IVI IVI Rooted and founded in love

ALL LIFE IS PRECIOUS

Volume 80 – 2019

Medical Missionaries of Mary

Founded in Nigeria in 1937 by Dublinborn Mother Mary Martin, today MMMs number about three hundred and fifty Sisters, who come from twenty countries.

A growing number of men and women around the world are Associates.

The three words in the Congregation's title carry the inspiration that gives us energy to become engaged in healing some of the world's pain.

Medical: "Be with those who suffer, the oppressed, and those on the margin of life. Heal the sick, excluding no one... Let your particular concern be the care of mother and child" (*MMM Constitutions*).

Missionaries: "You are missionaries... Work with all people of good will. Join resources with them especially in the field of health, so as to bring about a world of justice and peace, where true human development is fostered, and human dignity and rights are respected" (*MMM Constitutions*).

Mary: "Ponder in your hearts the mystery of the Visitation. Be inspired by Mary's selfless love, her simplicity and faith, as she goes in haste to answer a human need, bringing with her the light that is life" (*MMM Constitutions*).

Our Motto: Rooted and Founded in Love (Eph.3,17)

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Leader's Letter



Dear Friends,

Once again we are happy to send you our Yearbook, *Healing and Development*, where you can read stories from our missions around the world. The theme for this year is: All Life Is Precious.

We are pleased that this publication is being sent out in October, which Pope Francis has declared an Extraordinary Missionary Month 'with the aim of fostering an increased awareness of the *missio ad gentes* and taking up again with renewed fervor the missionary transformation of the Church's life and pastoral activity.' He continued, 'The call to mission is a call rooted in Baptism and addressed to all the

baptized. Mission is a "being sent forth". Indeed, to cooperate in the salvation of the world, we need to love the world' (cf. Jn 3:16) (*Address to the National Directors of the Pontifical Mission Societies*, 1 June 2018).

Mission today includes caring for the planet. We invite each one to pray: 'Touch the hearts of those who look only for gain at the expense of the poor and the earth. Teach us to discover the worth of each thing, to be filled with awe and contemplation, to recognize that we are profoundly united with every creature as we journey towards your infinite light... Encourage us, we pray, in our struggle for justice, love and peace' (Pope Francis, *Laudato Si*).

Many people collaborate with MMM in mission. Our Associate MMMs are present in fifteen countries. They express the healing charism by working with us in ministry, continuing in ministries that we have handed over, and by their encouragement and solidarity with MMM. Our co-workers find ways to express the healing charism as they work alongside our Sisters. Recently some of our friends in Ireland undertook a sponsored hike to support a health outreach programme in Tanzania.

Many women continue to respond to God's call to become Medical Missionaries of Mary. Since our last issue, ten Sisters of four different nationalities - seven Nigerians, two Ugandans and one Brazilian - made perpetual profession. We feature those that took place in Nigeria. Six Sisters marked fifty years and four celebrated twenty-five years of commitment as MMMs.

Thank you for partnering with us in mission, bringing healing, hope and compassion to those in great need. Thank you especially for your prayers, encouragement and the sharing of your financial and material resources. We remember you each day when we gather for community prayer, asking God to bless you and your families.

Sr. Siobhan Corkery, MMM Congregational Leader

Front cover: A village scene in Togo, West Africa This batik and others used throughout the yearbook are courtesy of *Africa*, St. Patrick's Missions magazine. Back cover: Sr. Odette and friends in South Sudan **Photo credits:** MMM Sisters. Knit 2 Together courtesy of Linda Keogh

MEDICAL MISSIONARIES of Mary



Rooted and <mark>founded</mark> in love

MMM



St. Thérèse of Lisieux Patroness of the Missions

'You know, Lord, that my only ambition is to make you known and loved' (St. Thérèse).



Offertory procession – bringing MMM symbols



The perpetual profession ceremony



The newly-professed and silver jubilarians with the bishop and concelebrants



Sr. Celine joined the newly-professed for a photo.

For the Whole of My Life

'We need very spiritual finally professed sisters on fire with the love of God, great love for their congregation, leaders in the spirit of the congregation' (Mother Mary Martin, Letter, 1961).

On 20 October 2018 seven more women made perpetual profession in the Medical Missionaries of Mary in a solemn ceremony in Benin City, Nigeria. The weeks beforehand were busy for Sisters Vivian Igwe, Nwanneka Uduh, Juliet Ezekwere, Josephine Ezior, Theresa Adewole, Stella Ovientaoba and Jacinta Okechukwu. On this occasion two other Sisters, Eunice Okobia, and Charity Munonye, celebrated their silver jubilees.

At present, Vivian and Nwanneka, both nurse-midwives, are serving in Shogunle, Lagos; Juliet, also a nurse-midwife, is beginning our new mission in Kansiira, Uganda; Josephine recently completed a B.Sc. in nursing and is working in Abakaliki, Nigeria; Theresa is studying nursing in Benin City; Stella trained as a teacher and is based in Riara, Nairobi; Jacinta, also a teacher, is serving in Mukuru, Nairobi. Eunice works in Abuja and Charity in Abakaliki.

The Sisters prepared with a time of prayer during a retreat in Benin City. Then followed a few days to organize the venue and finish other arrangements. On the eve of the ceremony families, friends and Sisters arrived from far and near. Evening prayer was followed by socializing, with dancing and drums playing till late in the night.

The next day all gathered at nearby St. Joseph's Catholic Church for Mass beginning at 10:00 a.m. Rt. Rev. Martin Uzoukwu, Bishop of Minna



Srs. Eunice (L) & Charity (R) with Sr. Radegunda, also marking 25 years

Diocese, officiated and many other priests concelebrated. Parish priest Fr. Mike Ogun, SJ, welcomed everyone and Fr. Aghadi Onu, SJ, gave the homily. After the Bishop questioned the Sisters to be professed, they pronounced their vows, which were received by MMM West Africa Area Leader Sr. Celine Anikwem. The MMMs marking their silver jubilees renewed their vows.

A cloud of witnesses

Among those present on this wonderful occasion were Sr. Radegunda Shayo, representing our Congregational Leadership Team; many MMMs and MMM Associates, and priests and religious from various groups. There were representatives from the parishes of all the professed Sisters and jubilarians, as well from the local St. Joseph's Parish and from Mile Four Hospital in Abakaliki. The Mass was made more colourful by the singing of St. Joseph's Parish choir, joined by several MMMs. Before the final blessings Sr. Celine thanked everyone for coming and for witnessing the commitments of our Sisters.

The reception took place at the parish hall, where Abatete youth from Sr. Nwanneka's parish and women from Abakaliki provided entertainment. Gifts were exchanged, a wonderful meal was served and the occasion concluded with a prayer. The celebrations continued back in the Benin City community, with prayer, supper and, of course, dancing!

The Sisters expressed their gratitude to God, the MMM Congregation, and their families and friends for their prayers, support, gifts and love as they continue their journey of dedication to God and God's people.

A Drive for Life

In January 2014, MMM opened a mother and child outreach programme in Mukulat Division of Arusha Rural District in Tanzania. A needs assessment had indicated several challenges:

- · Low uptake of immunisation for children under five years
- · Very low uptake of antenatal care for pregnant women
- Malnutrition among children
- Lack of information for parents on health-related issues



L-R: E. Maher, Nenagh; Willie Keane, Nenagh, keeps the Drive alive! ; B. Curry, Lahinch; T. O'Shea, Kenmare

Supported by the Ministry of Health, Arusha Rural District, the programme provides primary health care for mothers and children under five years of age in 16 villages. Services include vaccines for children, antenatal care, and health education on issues such as childhood vaccination, balanced diet, and the pros and cons of traditional practices during pregnancy and breast-feeding.

Operated from the MMM compound in Ngaramtoni, Arusha, staff work closely with Oltrumet Hospital Mukulat Division.

Progress has been steady: in 2018 there were 418 antenatal or maternal/child health contacts; 8,887 immunisations; 186 teaching sessions; and 9,841 children were nutritionally monitored. In January 2019 the outreach team received a letter of appreciation from the District Medical Office and the Ministry of Health for achievements in the 2018 immunisation programme. MMM Associate Moira Brehony is the programme administrator.

Walking for health for all

Willie Keane, from Nenagh, Ireland, has visited Moira and her husband Eamonn, also an Associate, in Arusha several times. He has fund-raised for Ngaramtoni and for our MMM mission in Nangwa. In 2019 he gathered friends for a sponsored twenty-five-kilometre hike in the beautiful Gap of Dunloe in Killarney, appropriately naming it the Drive for Life Hike. The proceeds will help to purchase transport for the Ngaramtoni programme and support running costs. Ongoing costs are a bigger challenge than beginning the work! Vehicles have to be maintained, fuel purchased, staff paid, etc.



The bus outside Kate Kearney's Cottage

On 18 May, everyone gathered at local landmark Kate Kearney's Cottage, where the management generously provided free tea and coffee. Willie organised an old fashioned double-decker bus to travel to Muckross House, the starting point - no charge for the bus!

The route took them along the Kerry Way, through the Gap of Dunloe, and back to Kate Kearney's Cottage. Just in case someone needed to opt out, Willie's son Don did backup with his car.

Willie reported, 'We had a great time in perfect hiking conditions. The rugged Kerry hills looked magical. Eventually forty-three took part, with everyone completing the hike safely.'

The Drive for Life Hike was supported by: Kostal Staff, Abbeyfeale/Mallow; Kieran Moloney's Strollers Group, Listowel; and Willie Keane and friends in Nenagh. Don Keane sent the beautiful photos.



The hikers pause at beautiful Torc Waterfall.



At Muckross, Billy Keane (C) explains safety details to Kostal co-workers.



Listowel & Nenagh groups: kneeling L-R: K. Moloney + C. O'Connell, Listowel



A vaccination clinic: essential for child health



Sister Pricilia with staff members



Mothers and children at an outstation clinic

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Sent to Bring Life

In April 2019 Sister Pricilia Vrato participated in the Heritage experience in Ireland. While visiting our Motherhouse she spoke about the challenging work of MMMs in Huambo.

'After my first profession in 2016 I was assigned to our Huambo community. I work in the pharmacy unit of Our Lady of Perpetual Help Clinic. We have thirteen staff members and provide antenatal care, vaccinations for mothers and children, laboratory services and general medical consultation. We also have a HIV/AIDS unit. Once a month there is an outstation clinic at Missao da Gandavilla.

'We collaborate with the government: the Ministry of Health (MOH) provides vaccines and drugs for people with HIV/AIDS. They supervise the clinic monthly and check medicines yearly. The MOH also sent Coartem for malaria treatment, reagents for malaria tests, and mosquito nets. The government provides four staff members for the clinic, pays their salaries, and gives seminars and workshops for upgrading. They graded the



Pharmacy work at the outstation

road to the outstation when we requested this. Still, sometimes we do not receive medicines or vaccines and they are very expensive.

Life in the city

'Huambo has a projected population of 843,737 for 2019 (Instituto Nacional de Estatístiica) and there are many challenges. There are high levels of teenage pregnancy and domestic violence. Drug abuse and theft are common. Also, beliefs can prevent people from accessing health care. Some pastors in prayer houses encourage our clients to stop taking medicines and have faith that God will heal them. Because of this practice one of our patients died last year. Some mothers do not understand the value of antenatal care or vaccines for their children.

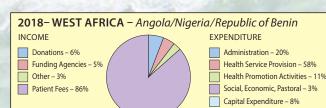
'Many of our clients are very poor. At the outstation, most villagers are farmers and cannot afford to pay for their medications. Despite the grading, the road is still bad and there are no health facilities nearby for emergencies. A pregnant mother and her child died as her family tried to take her to the hospital in town. There are many other similar cases. And unfortunately, people living with HIV/AIDS are still stigmatized. Many don't want to be seen coming for their treatment.

'Despite these difficulties, sometimes we give people hope. Shortly after I arrived back from Ireland a woman and her two children came to ask for food. I was shocked to see one of the children had no clothing. With help that I had received from the Apostolic Work, I was able to give the mother some warm clothes for him. She was very grateful – then said they were living in the street. I asked her to return so we could discuss how together we could change her situation.

'We are grateful to those who make it possible for the people to change their lives.'



Sr. Laurinda and friend enjoy a home visit.



Keeping Hope Alive

Sister Jacinta Mahakwe, from Nigeria, made perpetual commitment in MMM in February 2018. A trained microbiologist, she obtained a B.A. in Theology in Nairobi. After working in rural Abuja in northern Nigeria, she was assigned to our MMM community in Salvador, Brazil. Here MMM runs *Projeto Consolação* (Project Consolation), whose aim is to support families, especially mothers, whose members have been assassinated as a result of urban violence.

In Salvador drug syndicates and organized crime battle for control of local markets, making the city among the most violent in Brazil (Wikipedia). Many people live in poverty and women and girls are at high risk of sexual exploitation. There are also pressures from the effects of urbanization. Sister Gladys Dimaku said that in March 2019 torrential rain left the city flooded because of poor waste management. 'Drains were blocked with waste, bringing waterborne diseases.'



Jacinta participates in a liturgy.

Despite these challenges, Jacinta's first impressions of her latest mission were of a vibrant and resilient people, sustained by their faith and mutual support.

Landed!

'I arrived in Brazil in March 2018 and got a warm reception from the Sisters. In the first few days I visited the city and saw many historic places. They give a great insight into one of the most defining features of Brazilian history: the African Influence - from culinary delicacies



The MMM community in Salvador

Back in Salvador

to musical expressions to religious traditions. Six days later I travelled to Brasilia for the language course, organized by the Center for Intercultural Formation.

'Though I found the first few weeks demanding and stressful it was a special time: to learn Portuguese and study the customs and aspirations of the Brazilian people; to develop a new way of looking at my culture, Brazilian culture and the diverse cultures of the others on the course; and to prepare myself for what the Spirit was asking of me as part of a new people. BRAZII



Checking a woman's blood pressure



Jacinta arrives in Brazil!

'The Sisters and staff at Project Consolation were supportive as I joined in the activities, including weekly visitation to bereaved families and the crafts and skills classes used as healing therapy. With the pastoral health group we provide medical treatment and massage and counselling for the women and youth.' Women are taught how to use recycled materials for the art work and there are opportunities to demonstrate proper waste disposal and care for the earth.'

Jacinta continued, 'Brazilians are warm and welcoming and are happy to help in any way possible. In the interactions and conversations between young people and their parents, opinions are shared freely, thus building trust. Brazilians bring everything to God in prayer in different religious activities, gestures and festivals. They have great devotion to the Blessed Virgin Mary and the saints, which are among the core aspects of Brazilian culture and identity.'

2018-BRAZIL INCOME

Funding Agencies- 9%

EXPENDITURE
Administration – 12%
Social, Economic, Pastoral – 88%



Working with a women's group

HONDURAS



Staff Kenia monitors a small coffee business in Choloma.



Cleaning up the environment in Choloma



A visit to the elderly in Siguatepeque

Light in the Darkness

Our MMMs in Honduras are witnesses to the plight of thousands of ordinary people seeking to escape unrelenting violence and unemployment. These people joined the caravans of migrants traveling from Central America to the USA. Sister Renée Duignan said, 'Many of those in the caravans originate from our area in Honduras. Seeking a safe place for their families, they are willing to take great risks in the hope of a better life.' Even in this atmosphere of seeming hopelessness, our Sisters work with local people to care for the Earth.

Sister Rosalinda Gonzales explained, 'In Choloma the escalation of crime and violence which compelled Hondurans to join the caravans last year has not abated. Protest marches of groups of workers occur throughout the country almost every week. The blocking of main roads and destruction of property has brought confrontation with the military police, resulting in fatalities. These only added to the usual statistics of violent deaths. In this atmosphere, working together to care for the environment has shown a bright light for us.

'In keeping with our MMM Congregational Plan and Mission Statement we committed ourselves to living creation spirituality. It was included in workshops and classes with PIRE children. When the diocese utilized *Laudato Sí* and made care of the environment a priority, we collaborated with like-minded groups. Our pastoral social



Tree planting in Choloma

groups planted four thousand trees and practiced recycling. The children of our program participated in the inter-parish March for the Environment. It was inspiring to see them full of pride about the difference they can make in their communities.'

'Every time you visit me, my pain goes away.'

Sister Margaret Nakafu reported that in Siguatepeque, MMMs work with parish Eucharistic ministers and social ministry members. 'We reach out to the sick and elderly in their homes with a compassionate presence, offering Communion services, and medical, social and emotional support. For the last two years, I have been building relationships in the community. With a part-time counterpart, we visit families in eight communities monthly and in two communities weekly. As we leave, people say, "Thanks very much. Every time you visit me, my pain goes away for the moment we spent together."

'One of the people we visit is Doña Maria (not her real name). She is 78 years old and lives with her youngest son. When we met her eighteen months ago, she felt abandoned by her children and society. Doña Maria could spend days without food, water and personal hygiene. Her son might give her a boiled egg and a cup of coffee to last a whole day. Occasionally a neighbor brought her cooked food. With the Eucharistic ministers, we visited her daughter, about five kms. away, and discussed Doña Maria's reality. The Christian community and the family are now more supportive of Doña Maria.



Sr. Margaret visits a family.

'We are continually blessed by the resilience and commitment of the local people to serve their communities and the environment.'

2018-HONDURAS





EXPENDITURE
Administration – 12%

- Curative Health Services 9% Preventative Health Services – 19%
- Social, Economic, Pastoral 46%
- Capacity Building/Training 9% Capital Expenditure – 5%



Struggling for Life in Mukuru

On a visit to our mission in Mukuru, in the Nairobi slums, a member of our Congregational Leadership Team was told about the tragic deaths of three children in a fire in a house nearby. Their mother was anxious about their security and,



This is the reality for many people in the poor, overcrowded and often dangerous area where our Sisters work.

needing to go to work, had locked them inside.

Frequent floods from blocked drains affect housing and bring disease; solid waste is dumped directly into the streets and other open spaces; rubbish accumulates, with the risk of fires. A project supported by *Misean Cara* at Mukuru Health Centre to help with health and environmental sanitation began in November 2016. Sister Ursula Agge described some of the activities that help to bring a better quality of life.

Community clean-up in Mukuru

'We engage the youth and other community members to clean their environment weekly.

We clear drains and other areas that might cause harm. There are usually around 120 people each time, including 90 youth.

'After the clean up, the youth select the usable plastics from the dirty materials and sell them to get money to save and better their lives. At present 22 young people are doing this.'



A house in the local neighbourhood

While diseases caused by poor hygiene and lack of sanitation are common, and in 2018 there was a cholera outbreak, Sister Ursula said, 'We have been able to diagnose infections like tuberculosis at an early stage. We started monthly door-to-door visits with community health volunteers (CHVs) in November 2016. The CHVs know the villagers well and we have easy access to the houses. If anyone has a cough, we ask for a sputum sample for testing. If it is positive, the person is put on treatment at our facility and we revisit the family.

If the sputum is negative, we give health education. In 2017 we had 35 positive cases after testing 287 people; in 2018 we had 65 cases after testing 415 people.

Working for social change

Other issues of great concern are the prevalence of gender-based violence (GBV) and human trafficking (HT). The programme works with CHVs to raise awareness, and if possible, to bring about change in attitudes. Ursula explained, 'The CHVs give us a lot of feedback and referrals from the community. We keep them updated through training and workshops.

'In 2018 we reached 1,067 people with GBV awareness. We cared for 45 survivors at our facility and referred them for further services. We also reached 1,945 people with awareness on countering HT. We supported 22 trafficking victims at our centre and subsequently referred them to the relevant authorities.

'Despite the security concerns our CHVs feel in raising awareness about GBV and HT, and the challenges that survivors face, more cases of GBV and HT are coming forward. This gives us all hope.'





Collecting plastics for recycling



A march on World AIDS Day for gender activism



A support group for survivors of genderbased violence

MALAWI



Sr. Cecily (L) with VIA providers at Kasina Health Centre



Nurse Chisomo talks to women about cervical cancer.



The VIA providers and a view of the health centre

Fighting for Women's Lives: Preventing Cervical Cancer

Sr. Dr. Cecily Bourdillon painted a stark picture of the reality still faced by women in the world's less developed regions. According to WHO, cervical cancer is the second most common cancer in these women. In 2018 there were about 311,000 deaths globally, more than 85% in low- and middle-income countries. It is the commonest cancer in Malawian women, with about 1,600 deaths yearly.

Cecily said: 'In 2014, we initiated a home-based palliative care programme in Kasina Health Centre. From 2014 to 2018, we registered 16 women with cervical cancer; all died after an average of 10 months. We now care for 10 women, 5 of whom receive palliative chemotherapy at Kamuzu Central Hospital. Radiotherapy is not available in Malawi. Our palliative care providers help to relieve symptoms and are trained in morphine use for pain control.'



The home-based care volunteers with new bicycles

Cervical cancer is usually caused by human papillomavirus (HPV), sexually acquired. Early sexual activity and having multiple partners increase the risk, as does the presence of other sexually transmitted infections, smoking and HIV infection.

Prevention of cervical cancer

Cecily explained, 'Education is essential and we do this at social gatherings. We target the chiefs at their meetings at Kasina. We encourage women having HIV treatment to have annual screening.

'Primary prevention by vaccination against HPV is very effective. Cervarix has been available at private clinics in Malawi since 2011 but is unaffordable for the general population. The Ministry of Health began a pilot vaccination programme in schools. We expect that it will reach Kasina soon.

'Secondary prevention involves screening and treatment of pre-cancerous lesions. Screening can be simply done using visual inspection with acetic acid, or VIA. In 2014 several Kasina staff members were trained in the method and we began a weekly clinic. From July 2017 to June 2018, 666 women were seen for a first VIA visit; this rose to 1,252 women from July 2018 to June 2019.'

And sometimes treatment

Pre-cancerous changes are treated with thermal coagulation. In 2016, thanks to good friends, the health centre was able to purchase a coagulator and treat women immediately.



Chisomo using the coagulator

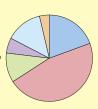
Cecily continued, 'With possible cancer we refer the woman for biopsy. If positive without tissue infiltration, surgery may be offered. While clients with invasive cancer are sent for confirmation and possible surgery, usually the only treatment available in Malawi is chemotherapy - palliative at best. A care provider is doing the Diploma in Palliative Care at Makerere University, so we can provide quality services for women with cancer. We have much to do until there are fewer women with cervical cancer coming to Kasina Health Centre for treatment and palliative care.'

The tragedy is that it can be prevented.

2018- MALAWI INCOME Donations - 64% Other - 2% Patient Fees - 29% Funding Agencies - 5%

EXPENDITURE

Administration – 19% Curative Health Services – 46% Preventative Health Services – 11% Social, Economic, Pastoral – 6% Capital Expenditure – 14% Capacity Building/Training – 4%



Literacy: a Precious Gift

In October 2015, MMM opened a community in Torugbene in the Niger Delta. In one of the most bio-diverse places on Earth, ecosystems were collapsing because of oil spills. (See MMM E-news Nov 2015). In this oil-rich area, most people were living in great poverty. There was high unemployment, lack of industry and education, and poor hygiene and sanitation. Malaria and anaemia were common among the children.

Without a nearby health facility it was not surprising that patent medicine shops were common and people relied on unregulated local medicines. They were reluctant to seek competent medical assistance and life expectancy was low.



The local transport in Torugbene

Where to start?

When asked what MMMs could offer, local women said, 'Let them teach us how to take care of ourselves and our children.' They wanted affordable health care and guidance for the youth. Teenage pregnancy was a major concern. The Sisters were encouraged to teach basic preventive health and life skills.

According to UNESCO (Fact Sheet 2013), educated mothers are more likely to ensure that their children receive the best nutrients to help them prevent or fight off ill health, know more about appropriate health and hygiene practices, and have more power in the home to ensure nutrition needs are met. Education lessens early

marriages and births. Girls and young women who are educated have greater awareness of their rights, and greater confidence and freedom to make decisions affecting their lives.

Sister Francisca Maduike explained how the Sisters in Torugbene promote an atmosphere of caring and acceptance, facilitating an environment that allows girls to complete schooling. 'In approaching the issue of teenage pregnancy we initiated a girls' forum and a boys' forum. We usually hold the girls' forum once a month in our house. The idea is to learn more about our bodies and how they function; about reproductive health; and about discipline and integrity. We encourage and make provision for young mothers to bring their babies with them. We have assisted girls with health care and other needs.'



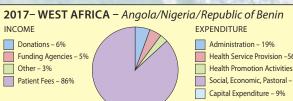
Getting around can be a challenge!

Realizing that everyone needed to be involved, she continued, 'We talked with community leaders and a local school principal. The principal agreed to allow girls to continue classes during their pregnancies. Girls who have dropped out but still want to complete their "O" Levels are encouraged to do so.'

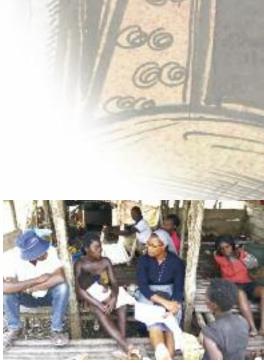
Using the grapevine

The MMMs are working to facilitate change in other areas. On a home visit they were told about a solution that hawkers were selling as a cure for sickness and as a body purifier. In fact, it was an insecticide and disinfectant. The Sisters invited the seller to their clinic and explained the dangers of the product. The woman was very happy with the interest and concern that the Sisters showed and left the clinic thanking them for the information.

Francisca commented, 'Since we began our mission, there hasn't been a dull moment!'



Health Service Provision -56% Health Promotion Activities - 10% Social, Economic, Pastoral - 4%



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NIGERIA

Doing a survey to assess local needs



MMMs set off for a meeting.



Much local housing is poor.

Republic of BENIN



Business administrator Sr. Franca Ogbunuju visiting a clinic



An ultrasound exam in the antenatal clinic



Mothers are conscientious about attending vaccination days.

Providing a Good Beginning

Access to basic mother and child services is essential for ensuring the health of women during pregnancy and delivery, and a good start in life for children. Early detection of risk factors can literally mean the difference between life and death. As MMMs, our particular concern is 'the care of mother and child, and the fostering of family life.' Sister Chinenye Imoh described the challenges in providing access to services in a rural setting.

'Our health centre was opened in Zaffé in 2000 because there was no clinic in the area. The government hospital was twelve kilometres away - not so far unless you had to walk there on a poor road. The people of Zaffé built a clinic and asked the bishop to invite Sisters to operate it.

There were also no maternity services in the district. The women walked to Glazoué, the next district. Others delivered at home or with unauthorized clinics. At the villagers' request, MMM opened a maternity section at Zaffé in 2004.



A staff member checks a woman's blood

Chinenye said, 'We have four midwives and three nurse aides and a doctor is available. We have two antenatal days, when we give health education. Even though charges are nominal, some still find it difficult to pay for their medications, ultrasound and lab tests. We don't turn women away if they cannot pay. Most are housewives and depend on their husbands for everything. Some husbands only buy the drugs a few days after the clinic. We refer high-risk women to the zonal hospital, 30 kilometers away, for assessment during pregnancy."

Initially there were over 450 antenatal visits each month but these have decreased to about 200 monthly since 2013. Many clinics opened nearby and there was a reduction in teenage pregnancy.

Time to be born

Zaffé accepts normal deliveries but sends complicated ones by ambulance to the zonal hospital. There is a paediatric hospital for newborns needing special care. There were about 50 deliveries per month until 2012, when they reduced to about

35 monthly. They started to increase again in October 2018 because the government closed down most of the unauthorized and private clinics run by unqualified personnel.

While Chinenye finds it a joyful experience to welcome new life into the world, there are still challenges. 'Most women don't understand the importance of proper assessment, which is not done by most of the other clinics. We visited some of these clinics and encouraged them to provide basic investigations. Some high-risk women that we refer come in labour because they want to deliver with us. Often the mothers do not attend for a six-week check after delivery. Fortunately they bring their babies for vaccinations.

The Sisters run the maternity in addition to their other ministries but it is not easy to get trained midwives. They usually resign soon after employment. The Zaffé people

Giving a health talk in the antenatal clinic

want the MMMs to provide even more services - easier said than done! As Sr. Chinenye remarked, 'The trust the mothers have in us keeps us going.'





A Dream for Life in Wau

Sr. Odette Nahayo described life in this new country and the tragedy caused by ongoing insecurity. 'Wau is a challenging place in which to work, but in response to our MMM Mission Statement, "we go ... where human need is greatest." The Sisters and other staff are committed to promoting the health and wholeness of the people,

working with many other stakeholders in the Eastern Bank region.

MMMs first came to Wau in 2013. Water and sanitation activities were started, then sack and kitchen gardens, and later immunisations in villages around Eastern Bank. In 2016 construction began on a healing centre (MMMHC), which was officially opened on 31 May 2018. Licensed as a primary health care centre by Wau State Ministry of Health, there are units for outpatients, social activities and community development.



Sr. Odette with local children

According to the World Health Organisation, maternal and child mortality rates in South Sudan are among the highest in the world. The most prevalent conditions seen in the healing centre are preventable: malaria, respiratory tract infections and diarrhoea.

A practical approach

To improve the quality of life and nutritional status and prevent conditions due to poor nutrition, the social department started a pilot project to buy seeds. Odette explained, 'We wanted to know if it would be possible for people living in a dry land, mostly cattle



Distributing seeds and watering cans

keepers, to grow food to sustain themselves and their families. Participants received tomato, *koudra, sukuma*, onion, egg plant, cucumber and okra seeds. Soon green leaves appeared and our MMM Congregational Leadership Team supported extending the activity.'

The plan is to target 100 people: mothers from vulnerable and poor households, patients with chronic illnesses and unable to work, and children and pregnant women. Mothers will have talks on diet, hygiene, disease prevention and self reliance, and will learn to make nutritious local recipes.

Malnourished children and those with chronic illnesses will receive treatment and food supplements. Those with access to land will receive seeds and tools and learn to grow their own food. An agriculturalist and a nutritionist will be employed.

A seed bank will be established and clients receiving seeds for the first time must return an equivalent amount at the end of the season. A demonstration garden will be established, where clients can learn about agronomy and appropriate technologies. Local, religious and opinion leaders will be sensitised to learn about the project and give their support.

The sad reality

The project was to begin in July 2019. Unfortunately activities are now on hold as insecurity increases daily. Local people have abducted and killed. Some who would have been project clients ran to the UN mission for protection.

Odette wrote, 'While we wait, our green plots, able to feed their owners and provide an income, have become dry and empty. In the meantime we continue our services at the healing centre and pray that peace will come. Please pray for the people, for the country, and for us.'



Republic of SOUTH SUDAN



Clients dug a water hole for irrigating the garden.



The seeds begin to germinate.



Vegetables ready for consumption and sale







Four Sisters celebrated in Drogheda.



Sr. Joanne Bierl is from Buffalo, New York. She trained as a nurse-midwife after profession and worked in Kenya for 2 years before going to Ethiopia in 1980. She was assigned to MMM formation in the USA in 1986. She also served in MMM leadership, did mission awareness and worked with the homeless in Boston. In 1989 Joanne returned to Ethiopia, where she began a centre for those affected by HIV, taught at a local seminary and was involved in local religious leadership.

Sr. Joanne returned to the USA in 1997 after election to MMM leadership. In 2004 she was assigned to Honduras, where she worked in primary health care before being elected to



Loading equipment for an outstation clinic

congregational leadership in 2009. Since 2015 she has served in Chicago in our mission development office and in MMM leadership.



Colette at the women's development house in Dadim

Sr. Colette Ryan is from Dublin. She trained as a secretary and worked as a shorthand typist and switchboard operator before joining MMM. After profession she did office work for 3 years before being assigned to Nigeria in 1975. She returned to Ireland in 1977 and helped with mission awareness before completing training as a nurse-midwife.

Colette was assigned to Ethiopia in 1983. She spent most of the next 25 years there, involved in community health and nursing. After a short time in Ireland, she was assigned to Kenya in 2010, where she worked in administration in a clinic in Nairobi for 2 years. Since 2012 she has served in Ireland in leadership and



.

administration at our Motherhouse.



Sr. Mary McHugh is from Dungannon, Co. Tyrone. She worked as a clerk and shorthand typist before joining MMM. After profession she trained in hospital administration and did secretarial work in Drogheda before being assigned to Nigeria in 1975. She served for 2 years as a secretary in the apostolic delegation in Lagos and in Ndubia for 5 years as bursar-secretary, and in MMM leadership. She was Regional secretary in Benin City for 6 years.

Mary returned to Ireland in 1990. For 10 years she did mission awareness work. Since 2009 she has been bursar for the MMM Area of Europe.



Mary enjoys a card game in Benin.

BILEE



Cutting the cake!





Sr. Noreen Smyth is from Ballyhaunis, Co. Mayo. She trained and worked as a nurse, midwife and air hostess before joining MMM. After profession she was a clinical teacher and assistant matron in Drogheda before being assigned to Nigeria in 1977. She was then responsible for lay missionaries in Ireland before training in pastoral care in the USA.

After working in the Motherhouse infirmary, in 1986 she was again assigned to Nigeria and was assistant in pro life (PLAN) work in Ondo for 6 years. She served for 10 years caring for the elderly in Kilmacow,



Sr. Noreen with Srs. Oliver and Leonie and PLAN staff in Nigeria

Co. Kilkenny. She moved to Mell, Drogheda in 2003, where she was MMM bursar and a contact person for Christian Meditation groups.

Since 2011 Noreen has served in our Motherhouse, where she has continued her ministry with Christian Meditation.



Eileen with a happy mother and child in Obudu, Nigeria

Sr. Eileen Quirke is from Dublin. After profession she trained as a nurse-midwife and was assigned to Nigeria in 1976. She spent 8 years there as a nurse and in MMM leadership. In 1985, she was appointed to formation. Based in Ireland and Nairobi, she accompanied women in their early years in MMM until 1996. She then served for 3 years in Tanzania, working in HIV prevention.

.....

After some months doing mission awareness in the USA, Eileen was assigned to Malawi in 2001. She worked as a nurse-midwife and in leadership for 9 years. Re-assigned to the USA in 2011, she did mission development work for 2 years. Since 2013 she

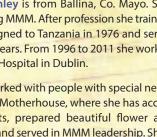
has served in our Motherhouse, working in the clinic and in Area leadership.

Sr. Mary Hanley is from Ballina, Co. Mayo. She worked in social welfare before joining MMM. After profession she trained as a laboratory technician. She was assigned to Tanzania in 1976 and served in a number of missions there for 14 years. From 1996 to 2011 she worked in the medical laboratory in the Mater Hospital in Dublin.

Mary also worked with people with special needs. Since 2010 she has been based in our Motherhouse, where she has accompanied Sisters to medical appointments, prepared beautiful flower arrangements for events in Beechgrove and served in MMM leadership. She currently volunteers 2 days a week at the Capuchin Day Centre in Dublin.



Sr. Mary in the laboratory in Kabanga





TANZANIA





An income generating group at Faraja



Raising awareness about human trafficking in a local village



Health workers received certificates after training about trafficking.

Medical Missionaries of Mary Yearbook 2019

16

That All May Have Life

Faraja Community-Based Health Care (CBHC) in Singida, Tanzania, has been carrying out HIV-related interventions since 2002. Beginning with HIV awareness raising, counselling and testing, its comprehensive programme now includes social services for most vulnerable children and orphans and palliative care. Activities to counter human trafficking began recently. With a high level of poverty, people can be easy targets for promises of a better life. Women, especially single mothers and widows, are hardest hit by the severe conditions because they have no social safety nets.

Trained community volunteers provide awareness about HIV, sexually transmitted infections, gender-based violence, stigma and discrimination, and human trafficking. Palliative care volunteers visit patients, find new clients, and give health education, especially about palliative care.

A social welfare department supports young people to complete their education and have better opportunities. Students are identified through school teachers, the home-based care and palliative care teams, and the Singida Municipality community. Vulnerable children of people living with HIV also benefit.

Responding with compassion

One young person who faces more than the usual challenges is nineteen-year old Mohamed. Diagnosed with haemophilia when he was seven years old, his blood lacks factor 8. His father abandoned him and his mother Amina (not her real name) soon after the diagnosis. While treatment for people with haemophilia has improved greatly in recent years, factor 8 replacement is very expensive. Mohamed needs to receive it in hospital. Faraja Centre has been helping with transport money, psychosocial support and other medical costs since 2014.

Mohamed didn't do well in school because of his poor health. He was badly disabled by bleeding into his joints. Patients with haemophilia can take routine medicines to maintain clotting factor to prevent bleeds but this is often impractical in poor countries. Faraja CBHC supported him for studies up to standard seven but he was unable to continue.

In March 2019 Mohamed began to experience pain and swelling in his ankle and bleeding from other areas. He was referred to Muhimbili Hospital in Dar-es-Salaam for more blood factor but his mother did not have money for transport. She had to stop doing her small income generating activities and her own relatives were unable to help. Amina appealed to Faraja.

After admission Mohamed had to wait for more than three months for factor 8, which was to come from abroad. Eventually he and Amina decided to return home, fearing that he might get an infection but the bleeding continued. Mohamed was unable to walk and he had a bleed into his elbow. He desperately needed a transfusion and Amina was asked to look for six people to donate blood. She had to use the transport money from Faraja to pay the donors. After the transfusion Mohammed did well but now transport money had to be found to go home. Amina suffers greatly in caring for her son.



Mohamed and his mother

Many others like Mohamed and Amina depend on Faraja CBHC and its supporters.

2018-TANZANIA

NCOME
Donations – 13%
Government Grant – 39%
Funding Agencies – 10%
Patient Fees – 36%
Other – 2%

EXPENDITURE Administration – 14% Health Service Provision – 73% Capital Expenditure – 8% Other – 5%



New Mission – New Life in Uganda

In March 2019 Sisters Jacquelline Nalubega, Juliet Ezekwere and Saratu Benjamin pioneered the opening of a new MMM mission in Kansiira, in the Diocese of Kasana-Luweero. The village of Kansiira is a 'landing site' for displaced people. A poor fishing settlement, it has few basic health or social facilities, and almost no utilities or government presence. On 28 March the Sisters moved into a rented house owned by one of the villagers. Located near the parish, it needed a few repairs, but on 30 March the parish priest, Rev. Dr. Lawrence Kimbowa, along with a few church elders and other leaders, blessed the house during a prayer service. Sr. Juliet shared some of the first impressions of our three pioneers.



Srs. Jacqueline Nalubega, Juliet Ezekwere and Saratu Benjamin

We have found the people welcoming, generous and hospitable. They are poor, with most houses made of mud with thatched roofs. There are no proper toilets. Only a few families can afford two meals a day. The area is very dry - almost like a desert during the dry season - with few trees. There are long periods of drought, resulting in famine and death of livestock and only short seasons of rainfall. There is little in terms of community development or education.

'Before we moved into the house, our parish priest organized a meeting with the village leaders of Kansiira Parish at the sub-county and district level to discuss issues of hospitality, ministry and security. There was a good turnout and the participants made concrete and positive suggestions about how to support us and our mission. We also introduced

ourselves to the diocesan health coordinator (DHC) and explained our mission to her. She gave us guidance on the requirements for diocesan health facilities and introduced us to the district health officer (DHO). He was very happy to have an MMM presence in Nakasongola District and promised his support. He encouraged us to work first towards changing the attitudes of the community towards health care.



A home visit with a village health team

'Our original spirit: Christ among the people' (Mother Mary)

'We began to visit homes on 1 April, starting with the villages in Kansiira Parish. We have completed the six villages there and will start in the four villages in Kikooge Parish. These visits are part of our household survey to obtain information about the people and their standard of living. It is also a way of interacting and getting to know the community members and their views on our mission.

We began choir practice with the Christians of Kansiira and are helping the lay readers to practice the Sunday readings. They had not done this before. In June we participated in the health camp organized by our parish priest and visitors from the USA in three sub-parishes.

'Over the next few months we will complete the home visits in Kikooge Parish. We will then evaluate the outcome and begin to discern the way forward.'



UGANDA



A missioning prayer by the MMMs in our Munyonyo house



The parish priest blesses the house.



Beginning our new mission with a prayer service



Nuala Rafferty (R) in the hospital with a generous knitter



Linda Keogh; Min Harris; Anjan Lobo, Clinical Facilitator for Frailty; Nuala; Sr. Mary



Marina O'Connor, Nuala & Laytown Irish Countrywomen's Association Guild



Third Age Action, Summerhill, Co. Meath, supports older people to age well.

Knit 2 Together-Gifting a Knit

Linda Keogh, Assistant Director of Nursing in the Medical Department of Our Lady of Lourdes Hospital in Drogheda, has been involved in an inspiring local initiative. She explained how a traditional skill is meeting a contemporary need, literally knitting the community together..

'When people are removed from familiar surroundings and admitted to a strange and busy hospital environment, it can be a very frightening experience, especially with an underlying dementia or delirium. The people we deal with are vulnerable, alone and scared. Considering the Health Service Executive's Values in Action we knew that we could create a better environment for our patients. One simple solution is a brightly coloured knitted blanket, which provides a wonderful source of sensory stimulation and comfort for older people and vulnerable adults.



Minister for Health Simon Harris gifts a knit to Linda Keogh.

'Many similar projects have helped patients with dementia. Fidget sleeves - hand muffs with bits and bobs attached - provide stimulation for restless hands, as do fidget blankets and twiddle muffs. Knitted cannula sleeves prevent interference with invasive devises. The Rotunda Hospital in Dublin has "Tentacles for Tinies", preventing babies from touching or trying to pull out their tubes. Crumlin Children's Hospital volunteers knit baby hats for premature babies. Volunteers have knitted and crocheted "Blankets of Hope" for people undergoing chemotherapy in Cork hospitals, donating over 15,000 blankets.

Coming together brings healing.

'My colleague, Nuala Rafferty, Clinical Nurse Manager 3, discovered the scheme via social media. The idea has been compared to knitting - "the intermeshing of loops of wool, knitting two together to make one stitch (K2tog)" - and has been successful in some NHS hospitals in the UK. We decided to ask local people to knit or crochet blankets for our patients. We contacted friends, family and hospital colleagues. A flyer advertised for volunteers, asking, "Do you know a Knitter?"



Linda Keogh with Sr. Mary Burns, gifting a knit

'This initiative quickly took a life of its own. Our local radio station, LMFM, helped and the Medical Missionaries of Mary and local knitting groups responded. Our local haberdashery shop, Tully's, advertised through social media, with more than 18,000 views nationally from April through June, when donations increased two-fold.

We took many phone calls for advice on wool types, patterns, colours and size, reflecting a society that was only too happy to assist. We are all very aware of the prospect of aging and its impact on us personally, on families and communities. It was evident that many in our older population are struggling to find a purpose in their

lives. As a society we can be quick to dismiss the critical contribution they have made and are still making with their knowledge, experience and wisdom. This project provided a channel for many with whom we spoke.

'The project was launched on 18 July by Minister for Health Simon Harris. Identifying its benefits, we changed the name from "Do you know a Knitter?" to "Knit 2 Together - Gift a Knit". (For more information see our Oct/Nov Newsletter on our MMM website)

Responsible Stewardship

We are grateful to our many generous friends who made it possible for us to continue our work in the past year. We also appreciate those who worked in cooperation with us, especially the governments of the countries in which we work. We could not maintain our services without them. Their contributions are included under funding agencies.

Unspecified donations received by our Congregational Business Administration are allocated, after discussion, to places in most need.

Pie charts

The first set of charts shows the breakdown of income and expenditure for the overall work of the MMM Congregation during 2017; the second set shows the breakdown for 2018. The proportion of income provided by funding agencies and our other donors amounted to almost 40% of our overall income for 2018.

We greatly value our partnership with donor agencies and the generosity of our other friends who have supported us so constantly over the years. We thank them for their interest and encouragement, which is bringing God's love and healing to countless thousands in need.

We also wish to express our thanks to the dioceses that supported us in the past year through Mission Awareness. For this report, these are the Dioceses of Elphin, and Down and Connor in Ireland, several deaneries and dioceses in England, and the dioceses in the United States that welcomed us through the Mission Cooperative Plan.

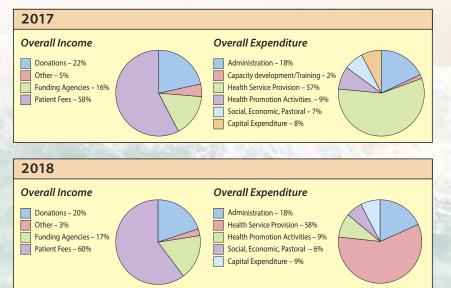
Please note the wording for some categories in the pie charts. Under Health Services Provision we have included all expenditures involved in Curative Health Services. Health Promotion Activities include those activities involved in Preventative Health Services. Some countries have a number of houses and ministries but one may take the bulk of funding, e.g. Makiungu Hospital in Tanzania. This is a large institution needing well qualified staff, large quantities of drugs, and up-to-date equipment.

Upgrading and capacity development for our staff and clients have a high priority. While charts for some countries lack a specific category for capacity development or training, many staff members take advantage of training and updating provided by our donors or by governments. Staff members are given time off to attend courses and continue to receive their salaries. MMM, through our Resource Team, also runs workshops funded by our donors, so these costs do not appear in our own expenses.

Under individual country reports, please note that West Africa includes Nigeria, the Republic of Benin and Angola.

Funding for those in initial formation in the international novitiate in Ibadan, Nigeria, and for MMM students in the East/Central and West Africa Areas and Europe is accounted for under the MMM Congregational Centre.

MMM has appropriate policies and procedures in place to ensure transparency and accountability in our financial reporting.



OUR PROMISE TO OUR DONORS

MMM Finance

When a donor specifies a country, project or special need (e.g. women's development, AIDS), 100% of that donation is transferred to the specified country or project. We allocate non-specified donations to the most urgent needs overseas or add them to our General Mission Fund, which pays for airfares, professional training of Sisters, and emergency needs overseas.



Women and children are empowered in Honduras.

How you can work with us ...

Pray with us. We remember you each day.

Join us as members of MMM.

Share our charism as MMM Associates.

Make a donation by mail or online at

www.mmmworldwide.org Leave an enduring gift of

 health and healing in your will.

Remembering us in your will or giving a donation in memory of a loved one helps us to plan for our work. You can specify how and where your gift will be used.

Please include: "the Congregational Leader, for the time being, of the Medical Missionaries of Mary".

Data protection information is available in our Privacy Statement on our MMM website at www.mmmworldwide.org

IRELAND



Sligo students: Sisters Stella, Ifeoma, Petronilla and Prisca



Petronilla with her project on environmental clean-up



The group of Irish Girl Guides and their leaders

New Life through Nursing

In January 2018 our Congregational Leadership Team (CLT) discussed the concerns of MMMs who have qualified in nursing but need to upgrade to degree level. Increasingly, this is a requirement for working in the nursing profession in different countries.

The CLT researched ways to meet this challenge and give Sisters opportunities that would equip them for life and ministry in the 21st century. The need was seen for an integrated approach to getting a qualification of a good standard, experiencing the current realities in the nursing profession, expanding the students' world view, and having an opportunity to grow in our MMM way of life.

A one-year course at St. Angela's College in Sligo, Ireland, allows international students already practising nursing outside Ireland to obtain a B.Sc. in Nursing. We were delighted when Sisters Stella Adaobi, Ifeoma Ifedi, Petronilla Irozuru and Prisca Ovat gained entry to the programme.



Ifeoma with the St. Angela's College poster

From varied backgrounds

Before the course Stella had nursing experience in our missions in Huambo, Angola and in Lagos and Abuja in Nigeria. She also did pastoral work at the Huambo prison. Ifeoma worked with the homebound in Abajah, Nigeria, and in public health awareness and palliative care. Petronilla worked part time at our primary health care outreach programme in Benin City, Nigeria. Prisca had experience at our clinics in Eldoret, Kenya and in Amukoko, Nigeria.

When the four MMMs arrived in Sligo in September 2018 they quickly made themselves at home and were warmly welcomed by the people of the town. They joined our Motherhouse community at Christmas, where they added greatly to the community spirit - helping out in Áras Mhuire nursing facility, working on the switchboard and helping the more fragile Sisters around the house. They also contributed greatly to the Mass and Divine Office.

A holistic experience

While doing their studies, the Sisters integrated into the local Sligo community and volunteered in a number of activities. They sang and read at Mass in Sligo Cathedral, participated in adoration of the Blessed Sacrament and helped to clean the church. Ifeoma did the five-kilometre Sligo Park Run/Walk for Health and Wellness and helped in Dooley Park. Prisca assisted with the Girl Guides and in the Ursuline network for scripture sharing. Petronilla helped with Sligo volunteer groups and Stella worked with the Sligo Sports and Recreation Partnership. Petronilla, Ifeoma, and Stella also volunteered with the Nazareth Nursing Home. These certainly expanded their world view!



Prisca takes her turn to water the crops at the community farm.

We are grateful to everyone who made this course possible. It more than exceeded everyone's expectations: in addition to equipping the Sisters with an excellent qualification it has given new life to our MMMs – and also to Sligo, it seems. One of their neighbours commented, 'I wish there were more like them in the world. It would be a happier place.'

Care for the Earth

In the past year our MMMs in Ealing, London, have worked to nurture and protect our environment in a great variety of ways. Sister Ruth Percival described some of their practical contributions.

Lobbying Parliament

According to the Catholic Agency for Overseas Development (CAFOD), on 26 June 2019 about 12,000 people went to Westminster to lobby their MPs, calling for further, faster action on climate change and environmental protection. They 'united, to say that, as people of faith, we are determined to act for our common home and that this climate crisis is not the legacy we want to leave for our grandchildren.' Over 300 MPs came out to meet their constituents.



Ruth said, 'I was there. Coaches from Scotland, England and Wales dropped their passengers at designated points. Some met in Trafalgar Square and walked

Sr. Ruth at the march for climate change

silently down Whitehall, passing Downing Street. All walked towards Parliament, meeting up with friends and colleagues.

'Those who had travelled the farthest saw their MPs in the Great Hall of the Palace of Westminster. Those from more local places went to the far bank of the River Thames. We met our MP, Rupa Huq, there and everyone had a chance to ask questions or to speak. To demonstrate fossil fuel conservation, MPs were taken to their constituents in bicycle-driven rickshaws. Parliament had already agreed to zero fossil fuel use by 2050, the first major economy to do so.



Our MMM home in Ealing

Our local parish

'We serve in the Justice and Peace and Care of the Environment Group. The Justice and Peace Group has prepared a special Mass to celebrate creation this year. We also help as Eucharistic ministers and readers, as a church fire marshal, as part of a group that prays for our teenagers, and in a weekly meditation group.

'A church herb garden was a response from the Justice and and Peace Group to Pope Francis' 2015 announcement that 1 September would be a World Day of Prayer for Creation. Some members prepared the garden and invited people to take what they needed.

'We help with a local food bank, collecting food one Sunday a month. Sadly, Ealing has people who don't have enough to eat. A member of the Justice and Peace Group fills his car with food boxes and takes them to the bank. In 2019 the Ealing food bank nearly ran out of food for the first time.

Mission awareness

'On visits to parishes I speak about my experience in Tanzania and how the people were experiencing environmental degradation as early as the 1980s. This was due to changes in rain patterns. Parishioners tell me they appreciate hearing about these realities and would like to take positive action.

Hospitality

'In the past year we enjoyed welcoming many Sisters and others who came for business, a break, or who were just passing through! We also celebrated Sister Mary Shephard's diamond jubilee of profession.'

ENGLAND



The chapel in our house: reflection leads to action



Srs. Mary and Maureen lead interest at the church herb garden.



Our house's back garden preserves another green space.

THE USA



(Back) Nina, Ronnie, Sheila, Margaret Anne (Front) Cheryl, JoAnn



Mary and Anne Marie at their 50th jubilee



Kay and Therese in Malden

Coming to Peace with Life

After many years on mission overseas, most of our MMMs in the USA are now linked to our Boston, MA, community. While facing the realities of diminishing numbers and aging, they continue to live our core values in a wide variety of ways, in the local community and beyond.

In our Somerville house, Sr. JoAnn does the finances and keeps in contact with former colleagues in Ethiopia. 'Ronnie' visits neighbors and has an active phone ministry with our many friends. Nina helps to manage the house -



Eleanor Carla Ann

doing minor repairs and maintaining the cars. She does many airport runs and brings people to appointments. Margaret Anne is active with social justice issues, especially human trafficking, and helps with driving and cooking. Cheryl offers compassion and care as she writes to prison inmates on death row. Sheila helps Margie Walsh, our MMM Care Coordinator, in caring for the Sisters' health and other needs. She also volunteers at the Little Sisters of the Poor and makes cards to support our mission in Brazil.

Somerville is also a house of hospitality to our Sisters, friends and benefactors visiting the USA.

Interconnectedness

Now living at the Little Sisters of the Poor, Sr. Eleanor is a busy volunteer. She visits other residents and is a Eucharistic minister and sacristan. Carla advocates for other residents and offers much-appreciated podiatry services. Ann, recently described as a 'people seeker', reaches out to those needing a listening ear, especially the most vulnerable.

Mary Ellen lives nearby in senior housing. She helps elderly people to prepare their medications and spends time with families with autistic children, using music therapy to help them express themselves.

Also coping with health issues, Srs. Jeane in Sancta Maria Nursing Facility; Mary, at Mary Immaculate; and Madeleine and Anne Marie, in assisted living at Youville House, each has a ministry of presence and prayer.



Madeleine

Not far away in Malden, Kay volunteers with elder services and helps a woman with her accounts. She takes time to care for the Earth, working in the garden and caring for the local fauna. Therese is involved with local and Area leadership, is a caregiver for the Sisters, and has a ministry to those in jail.

Sr. Bernie in Clinchco, Virginia, is a part time nurse practitioner and helps with Remote Area Medical. She offers hospitality to volunteers and goes to homes with pastoral and medical needs.

Creative fidelity

At our 2015 Congregational Chapter we said, 'We affirm our prophetic witness in the way that the elderly, sick and ageing are esteemed and cared for with dignity, both within MMM and in our ministries.' As the pace of ministry has decreased for most of these Sisters and their ways of living mission continue to evolve, 'seeking God in all things' remains central. As one Sister reflected, perhaps the most important mission now is coming to peace with life.

MMM Associates

Sharing a Precious Gift

On 31 May 2019, eight MMM Associates (AMMMs) celebrated the feast of the Visitation with the Sisters in our Motherhouse. MMMs renew their vows on this day and Associates renew their covenants. Making the evening especially significant was the covenant ceremony of a new AMMM, Maura Mullen. Maura shared what led her to this moment.

'Growing up in Drogheda in the 1940s and '50s I instinctively absorbed the deep respect the community had for the Medical Missionaries of Mary. Not only did

they work to bring medical care to disadvantaged people in foreign countries and improve their lives, but they contributed greatly to the medical and financial wellbeing of Drogheda natives too.

'My mother said how grateful the women of Drogheda were when Mother Mary Martin opened the maternity hospital in the town. When the hospital expanded into a major general hospital the Sisters contributed to the town's prosperity by giving employment to hundreds of Drogheda natives.

'In November 2000 the late Sr. Eileen Keogan was providing pastoral care in the hospital. My mother had suffered two strokes and Sr. Eileen visited her often. I later wanted to do some voluntary work. Sr. Eileen suggested that I answer the phone at the



Maura signs her covenant.

MMM convent. For several years I have done this one afternoon a week.

'Since I have always been interested in world affairs, politics and history, I sometimes find myself becoming quite cynical due to the current political climate, but I am reminded that, even though the news is full of carnage and injustice, good people like the MMMs are working to make the world a better place.'

Another AMMM, Thomas Nyawir, explained how he was attracted by our healing charism. 'I live in Nairobi, Kenya, with my lovely wife Judy (also an AMMM) and our children, Aaron and Audrey. Twenty years ago, I met Sr. Pauline Dean, who was running a project in one of Africa's largest slums, Kibera. I got very interested in the work, particularly to raise awareness about HIV/AIDS, and was employed in Riara Health Project.

'The Sisters always emphasized the need to be in solidarity with the poor and the sick, providing not only material help but also physical presence to offer muchneeded healing. They demonstrated a great sense of hospitality, listening to



Maura chats with Associate Vera Grant.

everyone "with the ears of their heart". I decided to dedicate my life to making a difference in the lives of the underprivileged, particularly women, youth and children.

'Being a beneficiary of someone else's generosity made it possible for me to have secondary education. I believe basic education is the only way to eradicate poverty. This belief, and the desire to pay it forward, led me with Judy's help to found Mirror of Hope.

'We currently sponsor over 100 children in Kibera through secondary school and 10 in university and have a program that economically empowers vulnerable women. We create an environment to restore hope to people who have lost hope in life.'



Thomas, Judy, Aaron and Audrey



Life skills training at Mirror of Hope



Preparing sack gardens at MOH



Associates in Ireland renewed their covenants.

Because of You

In Tanzania, the **Faraja Hospice & Palliative Care Programme** provides home-based hospice and palliative care (PC) to people with terminal and chronic diseases in Singida Municipality. Services embrace physical, psychological, spiritual and social needs. A skilled team, led by Sr. Dr. Marian Scena, comprises three staff and a part-time driver and visits homes 3 days a week. In 2018, 161 people were cared for and 55 new clients were accepted. After sensitisation sessions in 2019 for local leaders and health personnel, 63 new patients were admitted by the end of August. Cancer and cardiovascular diseases were the most common conditions needing care. Fourteen PC volunteers visited patients and gave health education to the community. In 2018 they brought in 26 new patients.

We are grateful to the current funders: Misean Cara, Ireland; Christlicher Entwicklungsdienst, Germany, J. Homer Butler Foundation, USA; MMM Congregation, and family and friends of the PC team. Singida Regional Referral Hospital provides oral morphine solution free of charge and Friends of Faraja provided much-needed food and clothing.

Sr. Dr. Geneviève van Waesberghe is a Capacitar International Trainer for East/Central and West Africa. Using simple wellness practices, Capacitar enables people traumatized by violence and displacement to heal themselves and their families and communities. With trainer Patty Abozaglo, she attended a retreat in Barcelona in June 2019 on the Wellbeing of Human Rights Defenders (HRDs) at Risk. Forty participants represented 24 countries from Europe, the Americas, Asia and Africa.

Geneviève shared her work with HRDs in 12 sub-Saharan countries and how they have integrated Capacitar practices into their daily lives. She said: "When you meet HRDs they don't usually speak about how they are or feel. I don't ask questions but presume they have had threats, were imprisoned, ambushed or kidnapped. After training, many come and say, 'Thank You! I now feel better.... One told me, 'Last night was the first time in 10 years that I slept without nightmares and a lamp lit in my room!'"

MMM and many individual funders supported these activities.

In Brazil, **Project Consolation** supported families that lost members as a result of urban violence. (See page 7) Staff members helped victims to deal with their grief and to overcome their isolation and stigmatization. There were sessions in therapeutic art using handcrafts and activities to reach children in schools.

St. Brigid's Third World Group in Belfast, No. Ireland, continued to fund the project in 2018. MMM allocated funds that came through our office in Ireland and through mission awareness in the USA.

Within Brazil, Cira França helped greatly and Dr. Sônia provided free weekly psychological accompaniment. Health professionals from *Pastoral de Saude Igreja Nossa Senhora da Luz* gave free consultations and medicines. Dr. Mazza Villaça donated medical supplies. Bernadino Moreira School gave food. Materials collected by Carlos Santana School for recycling were exchanged to pay electricity bills.





'Arise, shine; your Light has come!' (16601 NRSV)



Sr. Leonie McSweeney was born Patricia McSweeney in Waterford in 1932. She worked as a secretary before joining MMM in 1951. After training as a doctor in UCD she was assigned to Nigeria, where she served for almost 60 years in several mission hospitals. After working tirelessly to organize services during a cholera outbreak in Ibadan in the 1970's, she became interested in reproductive health,

especially in the Billings Method. Recognized throughout Nigeria for her training programmes and research, she was also involved in HIV prevention and behaviour change. In 2011 she was awarded Nigerian citizenship.

Sr. Leonie handed over her work in 2017 and was assigned to the Motherhouse. In 2018 she moved to *Áras Mhuire*, where she died peacefully on 4 May 2019.



Sr. Agnes Hinder was born in St. Gallen, Switzerland in 1927. Before joining MMM she trained in domestic science, as a nurse, and in anaesthetics. In 1962, she went to Malawi as a lay missionary. Four years later she joined MMM and did her novitiate in Drogheda. After qualifying as a midwife Sr. Agnes was assigned back to Malawi, where she spent most of the next 37 years, mainly in Mzuzu. She also worked in Nkhata Bay, developing

mother and child and outreach services, and in Chipini.

Sr. Agnes returned to Drogheda in 2007. She worked in the infirmary and clinic in the Motherhouse and helped in the stamp department. In May 2018 she moved to *Áras Mhuire* and died there peacefully on 28 March 2019.



Sr. Carmel Cooke was born Rita Cooke in Dublin in 1923. She worked as a secretary before joining MMM in 1943. After profession she worked in the x-ray and outpatients in the hospital in Drogheda. In 1952 she was assigned to Tanzania, where she spent 22 years, serving in several hospitals. She returned to Ireland in 1974 and helped in the Motherhouse and in the apostolic nunciature before reassignment to Tanzania in 1977.

She worked in a number of missions as a secretary, administrator, bursar and in local MMM leadership.

Sr. Carmel returned to the Motherhouse in 1994 and helped on the switchboard for many years. She moved to *Áras Mhuire* for extra care in April 2019 and died there peacefully on 19 May 2019.



Sr. Margaret Ann (Mollie) McGrath was born Margaret Mary in London in 1926 and joined MMM in 1951. She worked in Drogheda in hospital reception and managed the auditorium. She trained in household management and served in MMM leadership. Assigned to Uganda in 1972, Sr. Mollie worked in the social training centre in Masaka. She did vocation promotion work in England and was director of the National Vocation Centre. She also did

mission awareness in the USA.

Mollie returned to England in 1989 and worked with Churches Together in Britain and Ireland. She also began a telephone listening ministry and was involved with the Christian Community Movement. Sr. Margaret Ann moved to *Áras Mhuire* in 2017. She died there peacefully on 2 June 2019.



Sr. Martina Moriarty was born Bridget Ita in Dingle, Co. Kerry in 1927. She trained as a pharmacist and was an assistant pharmacist for 17 years before joining MMM in 1963. After profession Sr. Martina worked in the pharmacy in Drogheda for 3 years. She was assigned to Nigeria in 1969 and spent over 30 years there, working as a pharmacist in our missions in Abakaliki, Afikpo and especially in Eleta, Ibadan. She also

served in local MMM leadership.

Martina returned to Drogheda in 2000. For many years she volunteered in *Áras Mhuire*, helping in the oratory and with hospitality for visitors. When her health deteriorated, she transferred to *Áras Mhuire* in March 2018 for nursing care. She died there peacefully on 6 April 2019.



Sr. Joachim McGuinness was born Mary McGuinness in Ardee, Co. Louth in 1923. She joined MMM in 1944. She worked in the guest department in Drogheda for 18 years and in MMM leadership in the house of studies, *Rosemount*. In 1971 she was assigned to Chicago, where she did fund raising. In 1976, Joachim moved to Winchester, MA, where she did mission awareness and helped with hospitality. In Somerville, MA, she

coordinated mission awareness and did local pastoral work.

In 2000 she returned to our Motherhouse, where she remained active, helping in the stamp department. In 2010 she transferred to *Áras Mhuire*. She became ill suddenly on 19 June 2019 and was admitted to Our Lady of Lourdes Hospital. She died there peacefully on 20 June.



Welcome and Thanks

In 2019 our Congregational Centre welcomed **Sr. Angela Katalyeba** as MMM Congregational Secretary, taking over from **Sr. Patricia Lynch (L).** Thank you, Patricia, for so many years of dedicated service. Angela recently served as a councillor on our East/Central Africa Leadership Team.

Awards

During a ceremony at Dareda Hospital in Tanzania in November 2018, **Nangwa Village Health Programme** received a '3 Star' award for being the best performing health facility in Hanang District and 4th best in Manyara Region.

Also in Tanzania, in January 2019 the **MMM Outreach Programme** team in Ngaramtoni, Arusha, were awarded a letter of appreciation for achievements in the Immunisation programme in 2018. (See page 5.)

NEWS AND

Srs. Prisca Ovat and **Ifeoma Ifed**i received Alive Presidential Awards for Volunteer and Civic Engagement from St. Angela's College, Sligo and NUI Galway. (See page 20.)

Postulancy

In September 2018 six women began postulancy in Nigeria and one woman from Uganda began in Tanzania, making a total of fourteen women in these programmes.

Receptions

Since July 2018 four women completed postulancy and joined the international novitiate in Nigeria.

School of the Lord's Service

In February 2019, five MMMs gathered in Nairobi for a three-month programme as part of their preparation for perpetual commitment. They arrived from mission placements in the Republic of Benin, Uganda, Nigeria, and South Sudan. The facilitators were Sisters **Ekaete Ekop**, of our Congregational Leadership Team, and **Maria Jose Da Silva**, from our Ugandan mission.

Since July 2018, ten women have made perpetual profession in MMM.

Students

- Sr. Evelyn Akhalumenyo completed her medical internship and has registered with the Medical and Dental Council of Nigeria.
- Srs. Prisca Ovat, Ifeoma Ifedi, Stella Adaobi, and Petronilla Irozuru completed the B.Sc. in Nursing in St. Angela's College in Sligo, Ireland. (See page 20.)
- Srs. Obianuju Egwuatu and Josephine Ezior completed their B.Sc. in Nursing and internship. They are in the process of registration with the Nursing and Midwifery Council of Nigeria.
- Sr. Christine Natweta finished a Diploma in Midwifery in December 2018.

New Mission

Srs. Jacquelline Nalubega, Juliet Ezekwere and Saratu Benjamin pioneered a new MMM mission in Uganda in Kansiira, Kasana-Luweero Diocese. (See page 17.)

Sharing the charism of healing

Srs. JoAnne Kelly and Patricia Lanigan facilitated workshops on the MMM charism for our staff and volunteers on 4 and 16 April 2019 at our Motherhouse. A total of about 60 attended. The topic was 'healing spirituality', with JoAnne giving input on healing life's hurts. Patricia spoke on healing prayer and an anointing of hands was held, The days included Mass with the Sisters in Beechgrove, followed by lunch. Many participants said they appreciated the opportunity to meet each other, to see Beechgrove, and to interact with the Sisters. They experienced the meditation prayer as an opportunity to be still in their busy lives.

Congregational Project Officer

Our Congregational Leadership Team appointed a Congregational Project Officer, Mrs. Jacqueline McAuley, who began full time in September 2018. Her work includes coordinating project proposals and reports, keeping a database of projects and donors, organizing monitoring and evaluation of projects, and capacity building of Sisters and staff in the field. This key role involves liaising with MMM leadership and Area project managers and sourcing donors and groups with which we can collaborate. She will also visit projects in different countries. Jacqueline also took over as Mission Development Officer from Mrs. Moira Brehony. We welcome Jacqueline and express our gratitude to Moira for her work and commitment over several years.

Perpetual Professions in Uganda

Srs. Christine Nanyombi and **Margaret Nakafu** made perpetual commitment in MMM at Kimaanya, Masaka, on 29 September 2018. The Bishop of Masaka Diocese, John Baptist Kaggwa, officiated at the Mass and liturgical dancers, mostly children, added to the beauty of the ceremony. Family members and MMM Associates participated in readings and in the presentation of gifts and symbols. Sisters Christine and Margaret were presented to the congregation by their parents.

Sr. Maria Gonzaga Namuyomba, Area Leader for East/ Central Africa, thanked Srs. Christine and Margaret for saying 'yes' to God. She quoted Mother Mary Martin, who said: 'It is not the great work we do that matters, but who we are in the eyes of God.' On behalf of the MMM Congregational Leadership Team, Sr. Ekaete Ekop thanked the parents and the others present for their support. Afterward everyone enjoyed a meal and entertainment at the diocesan social centre.





Sr. Angela in Rwanda



Staff and Sisters in Nangwa



The presentation in Ngaramtoni



The SOLS group: L-R Srs Christine, Letitica, Magdalene, Chinenye & Bernadette

SILVER JUBILEES

Sr. Fidelia Adigo is from Ikenanzizi, Nigeria. She trained and worked as a nurse-midwife before joining MMM. After profession she was assigned to Tanzania and served there for 10 years. She assisted in formation work in Nairobi before returning to Nigeria in 2008. She was then matron at the Family Life Centre in Itam for



In the maternity ward in Tanzania

6 years. Since 2018 she has been directress at Itam Formation House.



Chatting to a young caregiver in Rwanda

Sr. Levina Samky is from Moshi, Tanzania. After profession she trained as a nurse-midwife. She was assigned to Nigeria and worked in Lagos for 4 1/2 years before returning to Tanzania in 2004. She served in Ngaramtoni for 10 years, coordinating a village health project, and then worked for a year in Kirambi, Rwanda. In 2018 she returned to Ngaramtoni.

Sr. Agatha Ezeokoye is from Obeledu, Nigeria and trained as a nurse-midwife before joining MMM. After profession she worked in Lagos for a year before being assigned to Rwanda in 1995. She worked there for 10 years and then did formation studies and trained as a hospital chaplain.Agatha served in formation ministry in our multi-cultural novitiates in Nairobi from 2009 to 2011, and in Ibadan, Nigeria, from 2011 to 2019. Since early 2019 she has been working at a clinic in remote Fuka, in northern Nigeria.



Visiting a family in Ngaramtoni



At the clinic in the Benin Republic

Team at our 9th Congregational Chapter. She was re-elected in 2015.

Sr. Radegunda Shayois from Moshi, Tanzania, and trained as a nurse-midwife after profession. In 1999 she was assigned with two other Sisters to begin a new MMM mission in the Republic of Benin. She served there for almost 7 years and then did formation and leadership studies. In 2009 she was elected councillor on our Congregational Leadership **'RECOGNISING OUR INTERCONNECTNESS WITH ALL CREATION WE CARE FOR OUR PLANET AND SHOW FORTH THE LOVE AND COMPASSION OF CHRIST TO ALL PEOPLE'** (MMM CONG. PLAN 2015-2019).

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