

Healing & Development

2015 Edition

MEDICAL
MISSIONARIES
of MARY



MMM

*Rooted and founded
in love.*

**Remember the source from which
your healing charism flows...**



Mother Mary as a lay
missionary in Nigeria in 1921



Glenstal Abbey, where pioneer MMMs
learned the spirit of St. Benedict



The beach near Hardelot, France where Marie
Martin nursed the wounded during WWI

Volume 76 – 2015

Medical Missionaries of Mary:

Founded in Nigeria in 1937 by Dublin-born Mother Mary Martin, today MMMs number about four hundred Sisters, who come from nineteen different 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)

PHOTO CREDITS

Our Lady's Hospice, Harold's Cross; Little Sisters of the Poor, Raheny; MMM Sisters, Sisters of St. Joseph, Boston, MA.

Vector Graphics by WebDesignHot, freegraphicsart.com

MMM Charity Reg. Numbers:

Ireland: CHY7150.

England: MMM Trust 293494

In the USA we are a

Tax Exempt 501 (c) (3) organization

Bank Details Euro:

Medical Missionaries of Mary

Bank of Ireland, Merrion Road, Dublin 4

Account No: 62835417 Sort Code: 90-12-12

IBAN: IE88 BOFI 9012 1262 8354 17

BIC: BOFIE2D

Bank Details Sterling:

Medical Missionaries of Mary

Bank of Ireland, Trevor Hill, Newry, Co Down

Account No: 12318032 Sort Code: 90-23-38

IBAN: GB10BOFI90233812318032

BIC (Swift): BOFIGB2B

Table of Contents

Leader's Letter		3
FEATURE	Unwrapping the gift that God is offering in Abajah	4
ANGOLA	"Remember the source from which your healing charism flows."	6
BRAZIL	Living the gift of our charism: bringing hope to the marginalized	7
HONDURAS	Sharing the vision	8
KENYA	Being the healing balm: our presence as MMMs in the Mukuru slums	9
MALAWI	Restoring hope in Lilongwe	10
NIGERIA	Education for Life: A Gift from God in Fuka	11
Republic of BENIN	Being sent: First Impressions	12
Republic of SOUTH SUDAN	"If you only knew the gift that God is offering you."	13
JUBILEES	Celebrating 50 years of commitment as MMMs	14
RWANDA	Water for households on the hills of Kirambi	16
TANZANIA	Remembering our loved ones: a source of healing	17
UGANDA	"To empower the poor, the powerless and the marginalised . . ."	18
FINANCE	Providing for a Global Mission	19
IRELAND	Living a healing charism in today's reality	20
ENGLAND	Affirming new energy and life in England	21
THE USA	Sharing the gift that God offers us	22
ASSOCIATES	The call to be an MMM Associate	23
SUPPORTERS	Because of YOU	24
	Obituaries	25
	News and Events	26

Healing & Development, the Yearbook of the Medical Missionaries of Mary,
is published by: **MMM Communications,**
Rosemount, Booterstown, Co. Dublin, Ireland
Tel: +353-1-2887180 • Fax: +353-1-2834626
E-mail: mmm@iol.ie
www.mmmworldwide.org

Editor: Sister Carol Breslin
Subscriptions: Sister Pauline Connolly
Designed by: Judi Lennon
Printed by: Genprint, Dublin
© MMM Communications
ISSN: 1393-8967

Leader's Letter



Dear Friends,

Once more we are happy to send you our Yearbook, *Healing and Development*. This time it comes soon after our Tenth Congregational Chapter. A Chapter is a landmark moment, when delegates come together to set the direction of the Congregation for the next six years. We took as our Yearbook theme a beautiful quote from our Constitutions that was also the Chapter theme: "Remember the source from which your healing service flows: Christ's love in which you are rooted and founded."

At Chapter we emphasised the need to live a simple lifestyle and to be in solidarity with and empower the poor, the powerless and the marginalised. A feature article shows how this is lived out in one of our newest missions, in Abajah, Nigeria.

There are stories from around the world where our Sisters, MMM Associates and co-workers live and work. The Palliative Care Team in Singida, Tanzania held a moving service in memory of those who died. A message of hope is brought to those with autism and their families in São Paulo, Brazil. Workshops on healing of relationships helped to deal with domestic violence in Nigeria. MMMs are also involved in another new ministry in Malawi and in chaplaincy work in Ireland.

We are encouraged by Pope Francis' "urgent challenge to protect our common home...to bring the whole human family together to seek a sustainable and integral development, for we know that things can change" [*Laudato Si*:13]. MMMs and co-workers in the Republic of South Sudan and Rwanda brought the precious gift of water to people in different situations.

In 2015, eight Medical Missionaries of Mary mark fifty years of commitment in their Golden Jubilee celebrations. They were chosen and commissioned to go out and bear fruit that will last. And they did! I know that you will join me in congratulating them.

We are committed to find creative ways to mutually deepen and share our charism with our Associate MMMs and co-workers. You can read interesting articles by and about them. MMM Associates are now present in sixteen countries.

The publication of the Yearbook coincides with the feast of Saint Thérèse of Lisieux, Patroness of the Missions. In her last years this young woman never left her Carmelite convent. Yet her deep relationship with Jesus led her to a profound love for her fellow human beings and to embrace the concerns of the whole world – an essential part of being a missionary.

Thank you, too, for embracing so many of those in great need around the world. Your support is bringing the Good News to them by your prayers and by your financial and material assistance. You are remembered daily in our prayers.

Sister Siobhán

Sr. Siobhan Corkery, MMM
Congregational Leader

Our front cover shows some of the sources of MMM's healing charism. Marie Martin's experience in France during the Great War showed her what could be done through nursing. As a lay missionary in Nigeria she saw a great need for health care, especially for mothers and children. Marie was convinced that Benedictine spirituality was the one that most suited our busy lives as MMMs.

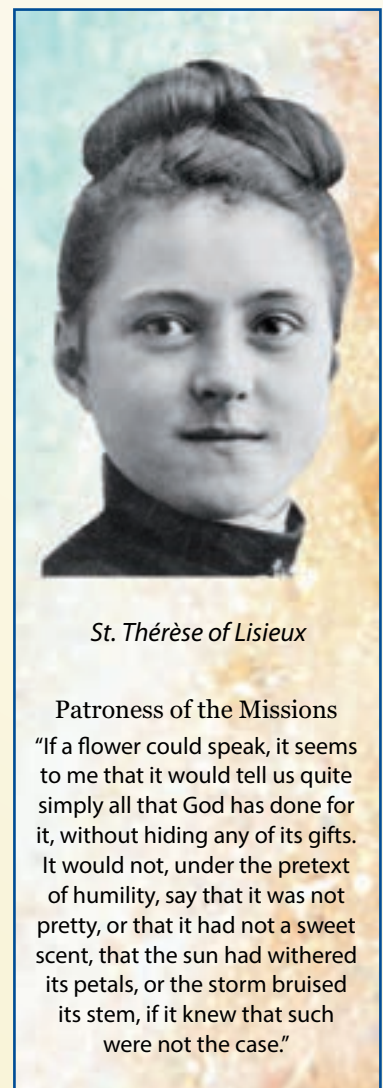
The painting of the *Woman at the Well*, here and on our 2016 calendar, is by Owen Walsh. It is one of three murals commissioned by Mother Mary Martin for the Motherhouse dining room in Drogheda.

MEDICAL MISSIONARIES of MARY



MMM

*Rooted and founded
in love.*



St. Thérèse of Lisieux

Patroness of the Missions

"If a flower could speak, it seems to me that it would tell us quite simply all that God has done for it, without hiding any of its gifts. It would not, under the pretext of humility, say that it was not pretty, or that it had not a sweet scent, that the sun had withered its petals, or the storm bruised its stem, if it knew that such were not the case."



Sisters Celestina and Ifeoma make friends on a home visit.

Unwrapping the gift that God is offering in Abajah

As part of our future directions from our recent Chapter, we were reminded that as MMMs we are called to an extraordinary adventure. Abajah, Nigeria is one of our newest missions. Sisters Celestina Aganyi and Ifeoma Ifedi are part of the MMM community there and were eager to tell us how, with Sister Cyrina Ogbebor, they are sharing in this adventure. In these early days they are getting to know the people, as well as “their beliefs and values, history and traditions” (MMM Cons.).



Emphasizing holistic care: we all need to feel connected to others

We arrived in Abajah on 11 December 2014 to a warm welcome from the bishop, the local parish and the village community. This is now the place where we search daily for the hidden treasure. Our basic mission is to experience and witness Christ, befriending the people and being a sign of unity. It is a leap in faith. To keep us focused from the onset, we met several times among ourselves and committed ourselves to pray daily for the new venture.

Abajah is a parish comprising eight villages. The village of Amaudara is made up of four ‘kindreds’. We held meetings with the leaders in each community ‘kindred*’ and members of the local parish. Some were positive but others were challenging. It was interesting learning about the existing structures and cultural practices. We learnt which villages were friendly with each other and which had decades-old grudges! We heard that long ago in one village there had been a falling out with a missionary who had then left in anger. The people felt that had been a curse. A few years ago, they again invited a priest to come. They had an

all-night vigil to pray for forgiveness. Less than a year later, they heard the MMMs had chosen to come to their village. They believe we are a sign from God, giving them a second chance. They want to embrace this opportunity.

Planning our Work

Presently we are doing a needs assessment survey of the eight villages. We visited each house to familiarize ourselves with the people. This has given us more opportunities to integrate ourselves into their lives. Families are closely knit so most celebrations are communal. We have become part of these communal celebrations.

We collaborate with the community leaders and the leaders of groups such as school principals, school prefects, youth groups, students, volunteers, tour guides, etc. They are generous with their time, resources, and advice. They show their friendship and gratitude by sharing their farm produce with us and help by giving us money for transport.

At the moment, our work consists of home visits, treatment of minor injuries (domestic accidents), and giving public health awareness sessions in schools and in the village. During the home visits we realized how we could answer other needs. We discovered some elderly people who were sick and homebound. The lucky ones were cared for by either a sick or an equally old person or a



Sr. Nkiru leads the pupils of Community Primary School, Amaudara in an environmental sanitation exercise.

grandchild, who seemed overwhelmed by the responsibility. Others were simply abandoned or were visited only very rarely. Some elders shared their anxiety about the youth and their present life-style. They asked us to educate the girls and women on how to keep a healthy home and help them with basic family life skills.

With community leaders, we organized forums to discuss what topics they would like us to focus on and how we could best respond. These included family counseling, especially for young couples, advocacy and palliative care for the bedridden and house-bound, especially for those who are abandoned, and teaching families skills to care for their elderly members.

Building an MMM community where we are nurtured for mission has been a learning and very rewarding experience. As a new community, we are conscious of our limited experience. Our dependence on God's Spirit to inspire our daily choices and decisions increases each day. We are committed to a regular communal discernment process to find the best approach to the challenges that present themselves. We try not to underestimate the value of intuition. We affirm creativity and keep improving communication.

Learning about compassion

We thought we knew what compassion was, but now we are steeped in it. There are days when we feel inadequate and lack what it takes to attend to the situation before us. A few times, the leaders have misunderstood us and misinformed their people of the purpose of our visit.

Sometimes we long to see visible signs and changes but immediate results are not measureable. How do you measure the relief on the face of an old man you have just cleaned up? How do you measure the smile of a bedridden woman who is given her first bath in three weeks? What about the spontaneous dance of a lonely 'granny' you visited and she exclaims that the Lord has sent Angels to her today? How do you respond to the faint 'thank you' of a sick man who has probably given up on life because he is not getting better? What about days when you lack the 'right' words to say to a girl who feels she has wasted her opportunities in life?

These situations, though frustrating, have also been "full of grace". The words of our Constitutions then seem so appropriate: "Know how to care, to share other's joys and pains, to touch their wounds...at times to be silent, helpless." We are learning to wait in hope. We may not see the outcome but we believe in what we are doing and that is life-giving.

We are grateful to our leaders, all our Sisters and friends, who have supported us with their prayers, encouragement - and challenges, too. We are gradually unwrapping "the gift God is offering" MMM in Abajah.

* A kindred is a clan or a group of related persons living not far away from each other.



Srs. Nkiru and Ifeoma console a mother on the death of her sons.



Working with women's groups: a talk on cancer prevention



Community Health Education: chatting with women in one of the kindreds

Angola

A great challenge in Angola is teenage pregnancy. The girls drop out of school. Many end up on the streets, addicted to drugs, victims of violence and involved in crime.



MMMs participated in the joyful celebration.



People of all ages participated in the procession.



The Eucharist: source of our healing and sign of our unity

“Remember the source from which your healing charism flows.” MMM Constitutions 9.11

Sister Stella Nwoye, from Nigeria, is on mission in Huambo, where MMMs provide much-needed health services. Angola is a country that endured the ravages of civil war from 1975 to 2002. The faith of the people sustained them during this time. Stella described an event that is very special for the people of Huambo, the Corpus Christi Procession, which would not have been possible only a few years ago.

“If we only knew the gift that God is offering as we walk in the procession with Him in the Blessed Sacrament and hear Him talk to us in the readings of Holy Scripture. ‘Lord we believe; help our unbelief.’

“The Feast of Corpus Christi celebrates our belief in the Body and Blood of Jesus Christ and his Real Presence in the Eucharist. It emphasizes the joy of its institution on Holy Thursday, in the sombre atmosphere of the nearness of Good Friday. This year we celebrated it on 7 June.

“The Archdiocese of Huambo organizes this procession. This year marks the 75th Jubilee of the Diocese, which made it very special and many people took part. The procession began at 2:00 p.m. with adoration of the Blessed Sacrament in the Cathedral. The Archbishop, Dom José Queiros Alves, was present.

“At 2:30 the procession began on the main street: first the Cross bearer with some seminarians as acolytes. Many children dressed in their First Holy Communion outfits followed. They had received their First Holy Communion earlier in the different parishes. After them came members of the Legion of Mary, other apostolic groups, many religious Sisters, other members of religious orders and seminarians. Many old and young people also took part, happy and light-hearted, dressed in their best clothes. Many watched from their windows or the sidewalks. The Archbishop and the priests shared the carrying of the monstrance with the Blessed Sacrament.

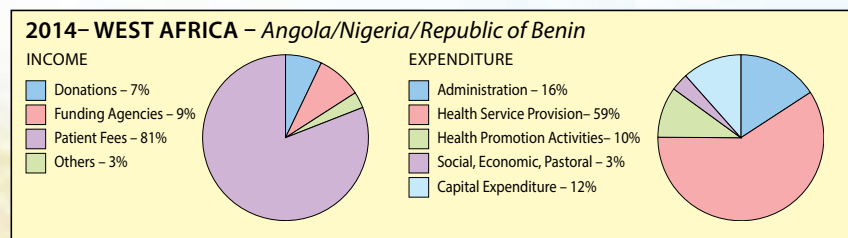
“The route of two and a half miles went through the main streets of the city, from the Cathedral to Fatima Church, where the procession ended at 4:00 p.m. We stopped for prayer, short readings, and blessings at five points along the way. The Archbishop gave a short homily and Benediction of the Blessed Sacrament to conclude the ceremonies.

“The photos give you some idea of the number of people who participated. There are views of the city and its buildings, many of which were badly damaged during war but now have been repaired.

“The Corpus Christi procession brings many blessings on the town. It is a reminder to us of the source of our MMM charism”.



A chilling reminder: Angola is one of the world's most landmine-contaminated countries. The majority were laid in and around towns and villages that have growing economies and expanding populations. Huambo Province has been opened up for tourism after some 38.5 million square meters of land were cleared (Landmines in Africa: 11 August 2015).



Living the gift of our charism: bringing hope to the marginalized

Sister Phyllis Heaney has worked with people with disabilities in São Paulo since the mid-1970's.* Meeting Jean Vanier, founder of L'Arche and co-founder of the Faith and Light communities, and Silvia Taveres, founder of the first L'Arche in Brazil, were inspirational moments for Phyllis' work with special children.

Around 1991, in the parish of Jardim Angela, she began a ministry with people with intellectual disabilities and formed a Faith and Light community. She dreamed of having a place where children with intellectual disabilities could stay and be cared for while their mothers had one day a week to care for themselves. With great support from Kiltegan priests and the parishioners, funding was obtained to buy a house. It is a welcoming centre called "Nest of Hope", from a Jean Vanier image of a nest as a safe supported place that allows the young to fly when they are ready. Also developed was "The Forum for Included", to struggle for the rights of these special people.

Phyllis said, "Since I last wrote in 2012 we have built an extension to our "Nest of Hope" with donations from generous people and participation by our friends and volunteers. The waiting list is always increasing. In addition, the health center opened a care and treatment center for our autistic children. I want to tell you how we have helped two families to change their lives.

"I met Mary about nine years ago. I will never forget the scene of extreme poverty. Mary was five years old, living in a shack with her mother, sister and brother, crying and hungry. There was no sign of food anywhere. Lying in a broken-down bed, she was very physically handicapped, severely intellectually challenged and could not speak. I asked her mother if she could come to our 'Nest of Hope'. The mother had a drink problem and spent most of her time on the streets. Deep down, she wanted the best for Mary, so now she agreed! Now fourteen, Mary is able to walk with help. She plays and her eyes are smiling because she is very happy. Her mother has stopped drinking and is no longer on the streets. She is spreading the good news of the Nest to others.

"John is twenty and has been with us for two years. In a wheelchair since birth, he is physically and intellectually challenged and has severe speech limitations. His mental age is six years and he is completely dependent on others for his care. His mother died five months before he came to us. He cried continuously and did not want anyone near him. His sister, who loves him dearly, had to give up her job to care for him. You can imagine the financial situation. Now John feels really at home and secure in our Nest. His smile is contagious. He loves to be in the middle of all activities. His sister says both she and John have found a new family."

As Jean Vanier said: "God wishes that these people, many times rejected and left out because of their handicap, are seen as having great value and are important in our society, our Churches and our religions...They call us to renounce our prejudices that make us see certain people as important and dispose of others. They call us to journey together."

*From "Your commitment to Special People", MMM e-newsletter Sep. 2012

A major issue in Brazil is human trafficking. For example, a recent census estimated that more than 250,000 children—some of whom are trafficking victims—are employed as domestic workers in Brazil.



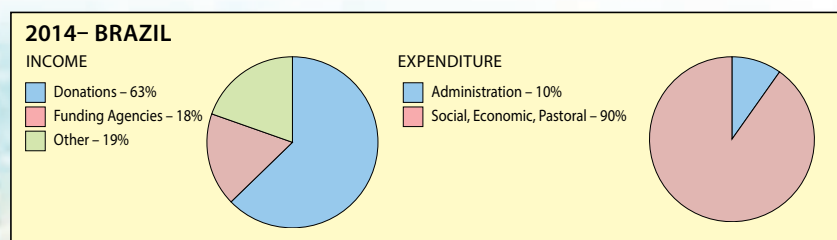
Nest of Hope: a simple sign for a ministry of love and healing



Bringing children, families and staff together in a support session means they are not alone.



Sister Phyllis has dedicated her life to the care of people with special needs.



Honduras

In Honduras today, MMMs and their staff find that their greatest challenge is corruption, with drugs playing a major part. One area where they live, San Pedro Sula, has the highest murder rate in the world.



Blessed Oscar Romero: martyred for justice in Latin America and beyond

Sharing the vision

Sister Danielle Darbro, from the USA, is on her first mission assignment. She told us how she is sharing the vision of a better world with children in Honduras.

"I held up a globe of the world. I turned it as the eyes of the children scanned it with curiosity. I stopped it so that the area of the Americas was facing them. Then I asked, 'Where is Honduras?' The eldest child, a girl of about twelve, studied the globe carefully and then said, 'Here!' as she planted her finger in the middle of the Pacific Ocean.

"The people of Honduras experience poverty on multiple levels. The MMM project in Lopez Arellano, Choloma, called *Centro Casa Visitación*, offers a wide range of services related to healing of mind, body, and spirit.

"One of these is our Education Reinforcement Program (PIRE). Our students face challenges with learning. There are many factors that can cause a child to not perform well in school, such as hunger, poor nutrition, domestic violence in the home, needing to work to help support the family, etc.

"Our PIRE program director and a psychologist, both Honduran, are very dedicated to serving the students in the project. The program director reinforces their skills in mathematics and Spanish. Our psychologist meets with them to address issues in the home that affect their behavior. Workshops offer skills to the parents on how

to support their children in their human development. I meet with the children to help them understand and develop their sense of human rights and self-esteem, to find their voice and learn holistic healing through Capacitar exercises, and yes, I include a little geography."

Local heroes

"Currently we are exploring human rights as seen in the life of Oscar Romero. The beatification of Msgr. Romero has been an excellent teaching tool to help these children discover that people have equal rights, including the right to attend school and to participate in one's government. I noticed that none of them had heard of Oscar Romero but they were incredibly interested in the subject. They devoured the globe with their eyes, so keen on learning about the world beyond their sector in Choloma. They wanted to learn not only where Honduras was, but also El Salvador, home of Romero. After teaching about basic human

rights as defined by the United Nations, I gave them a little quiz. I asked, 'Who has the right to attend school - some children or all children?' The loud shout of 'All!' and the smiles were my confirmation that the message had come out loud and clear.

"My hope is that these students will have a better life in the future. They don't control the poverty of their families or the violent society into which they were born, but I see in them the incredible potential God has placed into each one. When I see them excited to learn about important historical figures of Central America, who changed the world with their commitment to help the poor and improve society, I sense the gift God is giving to me. When they loudly proclaim that human rights are for everyone in the world; when I see their eagerness to learn and grow, it is an inspiration to continue seeking ways to serve the people here.

"My prayer is that I may use the gift well."



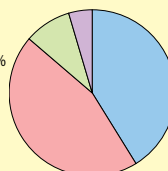
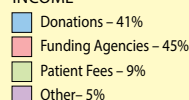
MMM Associate and Casa Visitación staff member Sirleny (L), with volunteer Maribel and PIRE students as they receive their new school supplies



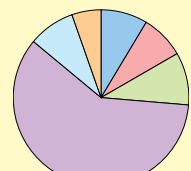
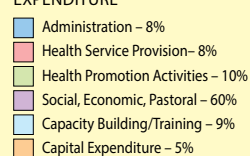
Other students who also benefit greatly from the PIRE programme

2014- HONDURAS

INCOME



EXPENDITURE



Kenya

MMMs, Associates and our clients have had direct experience of the climate of increasing insecurity and violence in Kenya. It is a challenge to maintain hope in these situations.

Being the healing balm: our presence as MMMs in the Mukuru slums

Sister Ursula Agge, from Nigeria, is on mission in Nairobi. She described some of the issues that she and her staff confront daily.

"We see the challenge of abject poverty in every slum. *Mukuru kwa njenga*, or 'a dumping site', in Mukuru, is one such place. Many people find it overwhelming to live in such deplorable conditions. We see men who are too sick to fend for themselves or their families. Others cope with the frustrations of life by taking the local brew, *changa'a*, or *miraa*, a stimulant. In any case, they do not know what is happening to them or to those around them. We see young women affected by sexual abuse, rape, and early or forced marriages. This is where we MMM Sisters provide our services.

"God has continued to show the way forward through our many friends and donors who make our work possible. We would like to tell you about some of those who visited us in the past year. We welcomed Mr. Paul Healey, Director of *Trocáire*; Brona O'Neill, the wife of the Irish Ambassador to Kenya; and some well known



A child passes a manual sewage and excreta cart.



Mrs. O'Neill and the Trocaire Director and musicians learn about Mukuru from Sister Ursula.

Irish musicians on 19 March. As always, it was all rain and wet in Mukuru, with sewage water overflowing and the usual smell from open gutters. Our visitors braved it just to see our facility.

"Their visit livened up our normal day. The musicians played flutes, harps and guitars to the amazement of our patients and staff. In return, our staff entertained them with Kenyan songs and dances. It meant so much to our patients to meet some of those whose generosity makes our services possible and effective.

"To give you some idea of the extent of these services, in the last year there were 16,067 visits to the outpatients department; 21,750 antenatal clinic visits; and 1,491 maternal and child health visits. In our laboratory 9,449 tests were performed. We had 4,120 sessions at our voluntary counseling and testing clinic and 259 visits to the tuberculosis clinic. We also made 3,868 home-based care visits with our staff.

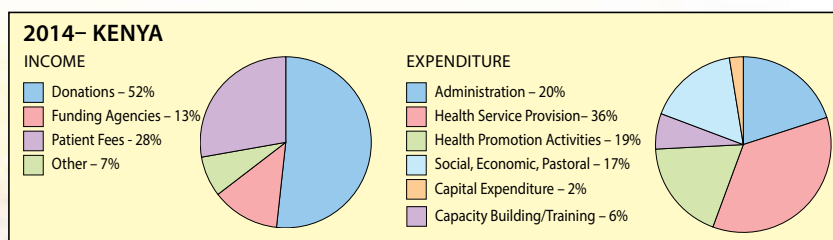
"We are grateful to those who help us to continue to bring Christ's healing love to others."



Trad for Trocaire: bringing the universal gift of music. Mission means learning from each other.



A typical scene in the Mukuru neighbourhood



Malawi

Among the obstacles to providing effective services in Malawi is poor leadership and insufficient funds to run the country, one of the poorest in the world.

Restoring hope in Lilongwe

Our MMMs in Lilongwe gave us an update on the progress of another of our new ventures.

"In late 2014 the District Health Officer (DHO) gave verbal approval for MMM to establish a Comprehensive Health Centre and a building was allocated. The Sisters involved in the program started a formal process to get the local community and the chiefs more involved. We had monthly meetings with them. On 17 February 2015, the DHO gave us written approval.

"We had a formal meeting with the key stakeholders, including the parish priest, the church council, other religious leaders, the City Council Health Co-ordinator, our local Member of Parliament, and the local chiefs and heads of institutions. We discussed who would be responsible for various tasks. New latrines have already been constructed.

"During a meeting on 7 April, the chiefs showed us the extent of the land and its boundaries and discussed securing a bigger parcel of land in case of future development. We had meetings with those who were to undertake the actual mobilization of the entire community. Recently the MMM Resource Team visited. We are working with pious societies such as St. Vincent De Paul, Divine Mercy, and the extraordinary Eucharistic ministers in Chigoneka. So our collaboration is having spiritual benefits in our neighborhood. Now we have started restructuring the house as a suitable place for the health services.



Babies are weighed during an immunization session.



Children play in front of the clinic.



Mateyo is very happy to be resuming a normal life.

"In the meantime our team, composed of volunteers from the pious societies and some Sisters, visits many people in need in our community. Fifteen-year-old Mateyo was diagnosed with grand mal epilepsy in 2008. He had contractures and was unable to walk. The team began helping him at home. He is now walking and able to carry out some daily living activities.



The chiefs show the land boundaries to the MMMs.

"Mr. Benisoni had a recurrent leg ulcer since 2005. He was crippled with it and had to crawl to get around. When the team first visited him he was booked for a wheelchair. The wound is now entirely healed and he is walking about, able to care for his eight children. On a recent visit he expressed his gratitude to God for restoring him to good health.

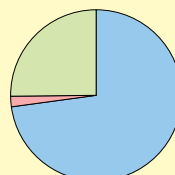
"The team also visited Baby Precious. Abandoned by his mother, he was being cared for by his grandmother and was not thriving. He is now walking and putting on weight.

"In the new health project in Chigoneka Parish, we are walking in the company of Jesus, who went about doing good, healing the sick. He is the source of our healing work. One of our clients said, 'Thank God for hope restored'."

2014- MALAWI

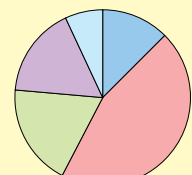
INCOME

- Donations – 73%
- Other – 2%
- Patient Fees – 25%



EXPENDITURE

- Administration – 12%
- Health Service Provision – 45%
- Health Promotion Activities – 19%
- Social, Economic, Pastoral – 17%
- Capacity Building/Training – 7%



In a country also dealing with increasing levels of violence and terrorism, a great problem we see in Nigeria is drug-resistant malaria. With an estimated 100 million cases per year, and over 300,000 deaths, malaria contributes to about 11% of maternal mortality.

Education for Life: A Gift from God in Fuka

Sister Joan Melinn told us about an approach that has brought healing to many couples in the north of Nigeria.

"At our mission in Fuka, we go to neighbouring villages every month for vaccination programmes. Through these contacts we became aware of some gender issues. For example, the female child was not treated as equal to the male child. She would be getting married so there was no need to spend money feeding or educating her. Husbands abused their wives for delivering only female children. Wife battering was common. Wives were not easily given money, even for food.

"Each village has a health committee and both men and women participate. In 2013 we began workshops on positive behavioural change with committee members and their spouses. They put what they had learnt into practice at home. Their neighbours wanted to know what had happened! When the participants told them about the workshop, more community leaders, through their health committees, asked us to help them as well. And so we ended up going to fourteen villages to do these workshops. The request came from the people.

"We decided to train the health committee members who had already completed the workshop to give it with us to have a greater impact. They would be speaking from their own experience about the change in their lives.

"The couples came for the sessions together and we began by separating the men from the women. We broke them into groups to discuss the problems of married couples. We told them that the activities involved participating, and would only be as successful as they made them. Their sharing had to be confidential and no names were used. One person reported for each group. Often a staff member had to report for the women because most are not able to read or write. We then told the men what the women had said and vice versa. We used dramas to illustrate the issues. In all the villages the issues were the same.

"We also gave input on gender selection so that men could see why the women do not determine the sex of their child.

"We gave them time to reflect on: 'What part do I play in the issues I raised? What can I change and what am I willing to change now?' They made a commitment to their spouse in public about what they were willing to do. The total number we reached was over 1,600.

"They really did change. Wife beating and fighting at night in homes reduced. The men began to give food to both male and female children. Husbands accompanied wives with sick children to the clinic or gave them money for treatment. In one case, a man who had divorced his wife because she only bore female children remarried her because he realized it is the male that determines the sex of the child.

"We heard about a couple who had not attended the workshop. They were fighting. The woman was screaming as her husband started to beat her. Two men who had attended the workshop intervened and said, 'That is not the way anymore. Let us sit down and discuss the problem and find a solution together.'"



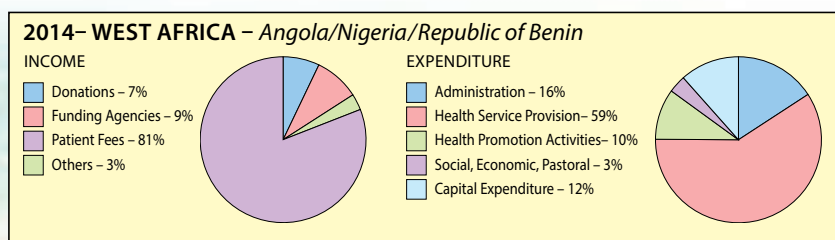
Women attending one of the workshops



It is essential to involve both men and women in the workshops.



Everyone learns about gender selection!





Sister Brigid has had a long and varied experience of mission.



Education about good nutrition is offered at the mission farm.



The busy clinic at Zaffé offers a range of health services.

Being sent: First impressions

"In response to God's call as MMMs, we recommit ourselves to be available and willing to be sent on mission. We remind ourselves of the importance of mutuality, of giving and receiving from those to whom we are sent and of being open to being converted by them." Future Direction from Tenth MMM Congregational Chapter

Sister Brigid Egbuna is from Anambra State, Nigeria. She is a trained nurse-midwife and has a diploma in human development. She has had wide experience on mission since her first assignment to Angola in 1982. She spent eleven years there in a variety of nursing roles, in public health and in home-based care. She was also part of a collaborative ministry at a health centre on the outskirts of Lubango.

Brigid then spent almost twenty years back in Nigeria. In a community health project she helped care for displaced and poor people and established income-generating activities. She was a hospital matron, a primary health care coordinator and administrator of a clinic.

In February 2014, Brigid arrived in her latest mission in the Republic of Benin. In Zaffé she is in charge of the outreach programme, bringing health education to churches and villages. She works with the Liliane Foundation, caring for physically challenged people under twenty-five years of age. She works in the pharmacy and is also involved in rabbit farming and agriculture. This year the rain is very late and farmers were only planting at the time when they should have been harvesting corn and groundnuts.

Sister Brigid described some of the challenges and joys of living and working in Zaffé.

"While the Republic of Benin is close to Nigeria, it is very different in language, people and culture. There is the language barrier. Drugs are scarce and we have frequent long journeys to Cotonou to make purchases. In the area of Glazoué, the high rate of teenage pregnancy is a big concern. Especially since April, lack of electricity has become an issue; we no longer have an unbroken power supply. There is no parish in Zaffé so we travel a long distance every day for Mass. We would like to have a community Mass even once in a month."

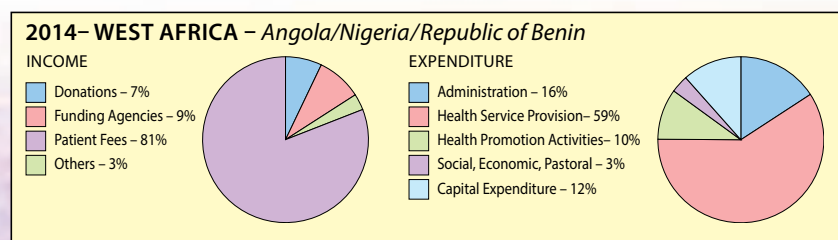
Many aspects are life-giving.

"The Republic of Benin is a peaceful country and life is simple. We experience the same peace in community.

"I like working with other religious communities and being able to bring the healing love of God to all. We enjoy simple liturgies and participate in diocesan events. Our work is recognized and appreciated by the Church and the communities we serve.

"It gives me life to plant seeds and see them grow to the stage of harvesting. It is a blessing that most of what we eat comes from our farm. It gives me hope that I can try new things when not too actively involved in the clinic.

"As we continue to share Christ's healing mission with the people of Benin, we pray that the seeds being planted in the hearts of young people today may yield an abundant harvest. Long live our MMM charism!"



“If you only knew the gift that God is offering you.”

Our MMM Sisters at Eastern Bank, Wau told us about a very special gift that demonstrated the true meaning of Christmas.

“The community in Abunybuny had been suffering from lack of water for many years. Like the Samaritan woman, they trekked in the noonday sun to fetch water from the nearest borehole, several kilometres away. Daily they walked, women and children, with jerry cans on their heads or pushing a wheelbarrow with about five twenty-litre jerry cans. The road is rough and the heat from the burning sand can be felt through open and sometimes worn-out sandals. How long would this last?”

“Lual was punished every day at school for arriving late. There were too many jerry cans in the queue when he arrived at the borehole. He never seemed to be able to make it on time. Life has been very hard for him, having lost his father in the country’s war. He had no interest in school, especially knowing that after walking four km. in the scorching sun he would receive an additional punishment when he arrived.

“Pierina had lost her husband. He had been called to serve as a soldier in a very insecure place and never returned home. Pierina was pregnant and was finding the four-km journey for water ever more difficult.

“People like Lual and Pierina were asking, ‘Where is God?’

“Luckily Abunybuny is in the catchment area where MMMs are serving in South Sudan. We heard their desperate plea for water and the Malta Mission Fund came to the rescue. They had visited the community in August 2014 and saw for themselves the plight of these people. They would help to provide a borehole.

“We started liaising with the Directorate of Water and Sanitation, whose prices are affordable but the drilling machine had gone for repair. We had to wait patiently until October for it to be ready. By that time market prices had soared and the price of fuel had trebled so we had to wait again until the prices went down. Happily, the digging and drilling commenced on 19 December. We prayed that the people of Abunybuny would be gifted with water for Christmas. Drilling went until 24 December, when the water suddenly splashed and washed us all. What indescribable joy: water at last!

“Now life is better for Lual and Pierina and many others in Abunybuny. There are fewer incidents of gastrointestinal diseases with the availability of water for proper hand washing, sanitation and hygiene. With less money being spent on medicine, more is available for buying food, so nutrition is improving. Water is available for crop irrigation. Prevention is better than cure.

“Nevertheless, on Christmas Day the Abunybuny community were joined by 184 internally displaced people who had fled their homes due to the insecurity. They were now challenged to share the gift they had received with others.”

A challenge faced by MMMs in South Sudan is balancing meeting the needs of the people and building capacity and not creating dependency. Some areas have a culture of begging: even three-year-olds come asking for money.



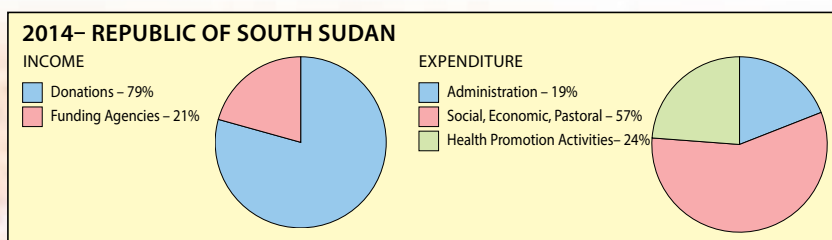
Blessing of the mobilisers and the bicycles they received to improve EPI mobilisation



Sisters Magdalene Upev and Irene Balzan at the borehole in Abunybuny.



Sister Josephine Nabisere during an Ebola Health Education Campaign at one of the schools in Eastern Bank



CELEBRATING 50 YEARS

of commitment as MEDICAL MISSIONARIES of MARY



Sister Bernadette Freyne, from Ballyhaunis, County Mayo, worked in a variety of jobs before joining MMM. After profession she served for a year in the MMM editorial office before training as an occupational therapist. In 1970 she was assigned to Ethiopia, where she lived for most of the next thirty years.

She spent seven years in Gambo, in charge of rehabilitation for people with Hansen's disease (leprosy) and in Bisidimo. After a break in 1978, during which she studied in Liverpool and Antigonish, Canada, Bernadette moved to Jinka, and was involved in community health and development for seven years. After

helping in the Ethiopian Catholic Secretariat in Addis Ababa, she went to Mikke, and for nine years was involved in social development and services for children with physical disabilities.

In 1998, Sister Bernadette returned to Ireland. She trained in clinical pastoral education, helped with mission awareness, and worked with refugees and asylum seekers. She was then leader for MMMs on home leave before becoming Area Leader for the Motherhouse in 2003. This included planning for the new building in Beechgrove. Since 2011, Bernie has done pastoral ministry in our nursing facility in Aras Mhuire.



Sister Mary Friel (L) was born in Auchinstarry, Scotland. After joining MMM she trained as a nurse-midwife and was a staff nurse in Clonmel before being assigned to Tanzania in 1973. Mary served for six years in Dareda, as a ward sister,

assistant matron and in MMM leadership. After mission awareness work she returned to Tanzania and was matron in Kabanga and assistant to the MMM regional leader. Sister Mary returned home after the sudden death of her sister, Anna (R), who was also an MMM.

In 1987 she was back in Tanzania, as regional assistant and directress of Sisters in their early years in MMM. She spent six years in Nangwa in a primary health care programme and six years as assistant co-ordinator and then director of Faraja Centre in Singida.

In 2010 Sister Mary returned to the Motherhouse. She has recently served in leadership in her community in Beechgrove.



Sister Marcellina McCarthy, from Skibbereen, County Cork, trained as a nurse-midwife. First assigned to Uganda, she spent five years in Kitovu, Masaka. After two years at the Apostolic Nunciature in Dublin, she was assigned to Tanzania. She trained in children's nursing and worked in Namanyere, Dareda and Makiungu.

From 1988 Marcellina served for seven years in mission awareness. During this time she trained in acupuncture. She returned to Tanzania in 1995 and was village health programme co-ordinator in Nangwa for two years. She spent eight years in Makiungu, in a project providing complementary therapies.

Marcellina returned to Ireland in 2006. She was a nurse at Rosedale residential home in Kilmacow from 2007 until MMM withdrew in 2012. She currently lives Mell, Drogheda, and helps with driving at the Motherhouse.





Sister Catherine Mulligan, from Dromiskin, Dundalk, County Louth managed a family business before joining MMM. After entering she managed the Lourdes Commercial Laundry for five years. She trained as a nurse-midwife and was assigned to Angola in 1974. She spent five years in Chiulo as acting hospital matron and in the

maternity, theatre and pharmacy. In 1979 she went to Serpa Pinta Hospital as matron.

Sister Catherine returned to Ireland in 1981. She was local business administrator and then labour ward supervisor in the Lourdes Hospital for two years. In 1985, she went to Ethiopia, spending a year in Mekele, Tigray as part of the Rapid Response Team in the famine emergency. In 1986, Catherine went to Aror, Kenya and was in charge of the health centre two years. Returning to Ireland in 1988, she was senior nursing officer for thirteen years in Drogheda, at the IMTH and the North-eastern Health Board. She was assistant director of nursing in the IMTH and in the midwifery unit.

Since 2001, Sister Catherine has been nursing staff liaison officer in Our Lady of Lourdes Hospital.



Sister Theresia Ladislaus, celebrating in Tanzania, is from Dareda, Tanzania. After profession she trained as a nurse-midwife. She completed her National Service in Tanzania and in 1977 she was assigned to Dareda, where she served for three years. She worked in Namanyere and Makiungu before training in pastoral work in London. In 1984 she was assigned to Ethiopia. She did primary health care (PHC) in Jinka and clinic work and PHC in Mikke.

After further studies, in 1995 she was appointed in charge of vocation promotion in Tanzania and guided women in their early years in MMM. In 2000, she went to Ireland and was the clinic Sister in the Motherhouse.

Sister Theresia did training in complementary therapies, including reflexology, sports injury massage and herbal medicine. Since 2001 she has been providing these services in Arusha, Tanzania.



Sister Breeda Ryan, from Tipperary, trained in institutional management. After being in charge of catering at our house of studies, Rosemount, she spent five years in Drogheda in charge of the kitchens in the maternity hospital, then the convent, and the IMTH. She also obtained a certificate in Italian cooking.

In 1975 Breeda went to Tanzania and served for six years in MMM leadership in Kabanga, then for two years as bursar in Mwanza. After further training in secretarial work, she returned to

Tanzania and spent twelve years in hospital administration in Makiungu.

In 1998 Sister Breeda returned to Ireland and was assistant financial controller for six years. She is currently our MMM Congregational Business Administrator.



Sister Mary McKearney, from Monaghan, studied typing and bookkeeping before joining MMM. She trained as a nurse-midwife and in 1971 was assigned to Spain, working for three years in Leon. In 1974 Mary went to Nigeria, spending nine years between Akpa Utong and Ondo. After mission awareness work she worked in Irele, Nigeria for eight years.

In 1994 she was part of the MMM emergency team that, with Trocaire, responded to the genocide in Rwanda.

After mission awareness work, Sister Mary was assigned to Mexico in 1998 to help begin a new mission but Hurricane Mitch intervened. It was decided to begin instead in Honduras, in response to the terrible devastation in that country. She spent two years in Marcala in primary health care and pastoral work.

Mary returned to Ireland in 2001. She was clinic Sister in Beechgrove for six years and served in MMM leadership. She was once again doing mission awareness work when she suffered an accident, necessitating prolonged recovery. She currently lives in the Motherhouse.



Sister Veronica Cawley (Ronnie), celebrating in the USA, is from Boston, MA, USA. She was a clerk for a life insurance company before joining MMM. After profession she was secretary in Winchester, MA and did promotion work for five years. In 1970 she went to Ireland, where she trained in hospital administration while doing secretarial work and helping in the Motherhouse Guests' Department. In 1974 Sister Ronnie was assigned to Malawi. She was administrator in Saint John's Hospital in Mzuzu for three years. She served in MMM leadership there and in Winchester. After mission

awareness work in Chicago she was assigned to Nigeria and did pastoral work in Oshodi, Lagos. Returning to Ireland in 1988, she was leader for returned missionaries.

In 1993 Ronnie was assigned to Uganda and provided counselling and pastoral care for people affected by HIV. After serving as a community leader in our Motherhouse, she returned to the USA in 1998. In Somerville she visited the elderly, worked in hospice and as a caregiver. She did pastoral work in Portsmouth, NH, and was part of the MMM formation community in New York. She continues her pastoral work in Somerville, where she now lives.

Rwanda

Among the many challenges to providing healthcare services in rural Rwanda is poor infrastructure, with many bridges and roads in a poor state of repair.



Florance waters her vegetables with water collected from the tank.



People happy to have water for their needs: a "green project" in more ways than one!



Obtaining water using a hand pump

Water for households on the hills of Kirambi

Sister Angela Katalyeba told us how many people working together brought new life in Rwanda.

"Rwanda faces a number of critical development challenges. Among these are a high rate of poverty (44.9% make less than 2 US\$ and 24.1% less than 1 US\$ per day); food insecurity; and high population pressure on the existing resources, including water and land. This makes the population vulnerable to hazards of climate change. Currently the average amount of land per family of 5 members is 0.5 ha, and the population growth is 2.76% per year. Population pressure has meant limited resources, resulting in conflicts and tensions.

"In November 2014 Kirambi Community Health and Development Programme (KCHDP), in the Southern Province, was chosen to be part of a pilot project to support households in the hills to get water. Working with the Scottish Catholic International Aid Fund (SCIAF) through *Troc  ire*, we will focus on Water Resources Management, emphasizing rain water harvesting and recycling waste water. This will support agricultural production and improved nutrition at household and community level, using a range of technologies. KCHDP is widely known for empowering the community to practice artificial land use techniques, including sack gardens, kitchen gardens, and storeyed gardens.

"Water will be stored in simple underground tanks or plastic tanks. We plan to install some bamboo tanks in the future. Underground tanks are made with mud bricks, with a plastic tarpaulin to hold the water, covered with iron sheets. It is eventually fitted with a small hand pump.

"Obtaining water has been a serious problem for those living in the Kirambi hills because they have to fetch water from the valley for drinking, cooking, washing, and for animals to drink. As a result, they cannot even think of cultivating anything. Some who are not strong enough use very little water and their hygiene is poor.

"The direct beneficiaries will include people living with HIV, widows, the elderly, female-headed households, people with chronic illnesses, and orphans. 'Many water projects provide water at community level but we are blessed to have water at household level,' they said.

"We started by mobilizing the beneficiaries and local authorities to raise awareness and assess community needs. The community was educated on climate change; about different sources of water; what destroys water sources; how they can protect their water source; and the effect practices have on the environment today and in the future. The beneficiaries visited places where the underground tanks and plastic tanks have been installed. This helped them to understand the new technologies from people who have been using them.

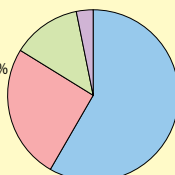
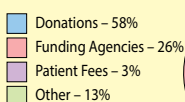
"MMM Kirambi is collaborating with many partners in this project. We shared the joyous day it was launched with beneficiaries and Cellule representatives, Sector executives, as well as representatives from *Troc  ire*, the District, and Immigration.

"By March 2015 KCHDP had installed underground tanks for twenty families and plastic tanks for nine families. They have started using the water for household purposes and for their gardens. Some have taken the initiative to dig and build their own and we have provided tarpaulin sheets. The technology is spreading very fast, with the community taking the lead. KCHDP is hoping that by March 2016 we will have provided water to 182 families.

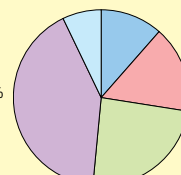
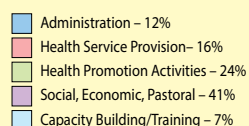
"We are grateful to SCIAF through *Troc  ire* that have supported us to bringing new life to Kirambi. The joy among people is immeasurable and the vegetable gardens around their houses are now blooming."

2014 – RWANDA/UGANDA

INCOME



EXPENDITURE



Remembering our loved ones: a source of healing

Sister Marian Scena, from the USA, is the doctor in the Faraja Hospice and Palliative Care Programme in Singida, Tanzania. She wrote about a remembrance service that brought comfort and healing to families and programme staff.

"We considered having a service to commemorate the sixty patients who have died since the programme began in September 2012. We researched what form such a service might take. We wanted to be sensitive to the local culture and the various religions of our patients. More than 50% are Muslim; Christians are from a variety of denominations.

"None of the families had had any experience of an ecumenical remembrance service such as the one we planned. We decided to call it a 'Meeting to Remember Our Deceased Patients in the Faraja Hospice and Palliative Care Programme'. Faraja Centre has a large home-based care (HBC) programme for persons living with HIV/AIDS. Eight of this programme's clients had also died.

"We held the Service on 13 November 2014. We invited two family members of each of the deceased, the Faraja Centre staff, Faraja Hospice and Palliative Care volunteers, the TUNAJALI HBC Volunteers who had cared for some of the deceased, a Muslim religious leader, or *Shehe*, whose deceased wife had been our patient, a Pentecostal minister whose deceased mother was our patient, and a Catholic priest.

"The Faraja Hospice Coordinator welcomed everyone and explained the purpose of the service. She expressed the hope that by coming together to remember our deceased, and by speaking about them and praying for them, there would be healing of the personal loss of our beloved."

Our common humanity

"Then the *Shehe* spoke. He had been asked to say a short prayer but said that he also had to speak about the palliative care (PC) services at Faraja Centre. He related how his wife had been diagnosed with terminal cancer in 2013 and he didn't know how to help her. Then he remembered that he had attended an awareness-raising session about PC services that were being initiated at Faraja Centre CBHC. He contacted the programme and the Palliative Care Team visited his wife. They visited her regularly and brought her morphine and other medications that she needed until she died two months later. After thanking the Faraja Team for the care he and his family had received, the *Shehe* said a moving prayer.

"Then in a 'reflective naming of each deceased', each PC volunteer who had accompanied patients and their families until and after death named the deceased persons.

"Unfortunately the Pentecostal minister was unable to attend so we encouraged families and volunteers to make short prayers for the deceased or to relate something they remembered from their lives. The Catholic priest summed these up in a final prayer. Everyone was invited for refreshments, where more sharing took place in an informal setting.

"This remembrance service was a pilot effort. The volunteers and a number of the families said they would like to have it every year because it had comforted them and brought them healing.

"In 2014 we accepted 94 patients into our programme, aged 2 to 94 years. Our PC Team and PC Volunteers made 1653 visits. Cancer is the most common diagnosis."

A major challenge for our MMMs in Tanzania is retaining qualified staff in rural areas. More attractive salaries and benefits are often provided in urban settings.



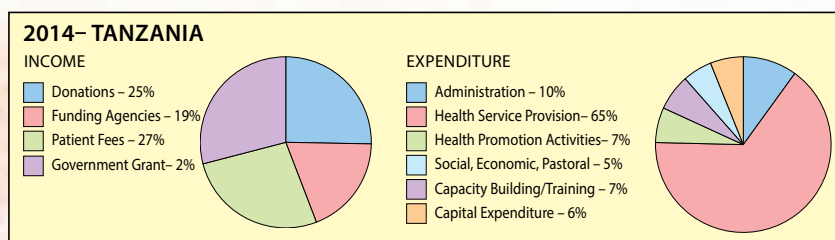
Banner used at the memorial service: Faraja Centre CBHC symbols and the names of those who have died



A preparation class for palliative care volunteers



Volunteer Saidi Mchembea is presented with a bicycle and back pack of supplies by Municipal Medical Officer Dr. Mugarula after completion of his training course.



Uganda

Despite large funding donations, corruption in Uganda has meant diversion of resources intended for health, development and education. It is difficult for people to maintain their integrity in the face of such a challenge.



The mud house was in terrible condition.



Nalubega with her children outside their lovely new home



Outreach services from Makondo Health Centre

"To empower the poor, the powerless and the marginalised . . ." MMM 10th Congregational Chapter

In 1987 the Ministry of Health and the Diocese of Masaka asked MMM to establish a permanent health centre in Makondo, which at that time covered twenty parishes. In March 1991, with financial assistance from the European Community, Caritas Norway and *Troc  ire*, a health centre was completed, 45 kilometres southwest of Masaka Town.

Among the objectives of Makondo Health Centre Integrated Programme is the promotion of the health and quality of life of people affected by HIV/AIDS in Makondo and surrounding villages in Lwengo District. Various tools are used to assess performance and encourage learning.

Makondo Health Centre runs seven days a week for curative, preventive, and HIV and PMTCT counselling services, with a full range of laboratory services, including HIV testing.

In seven centres, HIV/AIDS Mobile provides health services, palliative and pastoral home care visits, and support to single parents, grandparents, guardians, and orphans and vulnerable children.

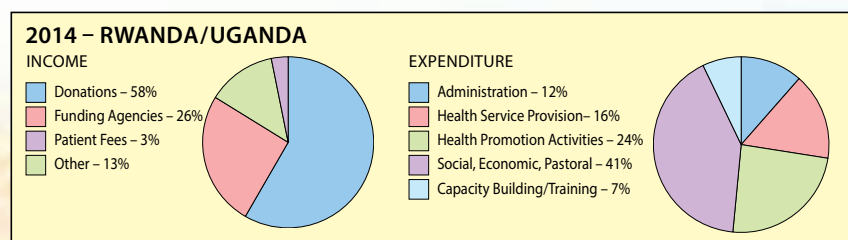
The Health Education and Development unit operates outreach training programmes in five villages. It empowers people affected by HIV with health education and awareness, human development, hygiene and sanitation, and animal husbandry. It advocates for social justice and human rights, particularly for women and children and encourages self-reliance. In 2014, over 2,800 workshops were conducted on child protection, gender and domestic violence, life skills for orphans and youth, capacity building, etc. Fourteen individual IGAs were supported. Also in 2014, fifty-nine latrines and one house and a water tank were constructed.

Nalubega is 30, a widow with three children. "Since my husband's death, life has not been easy for me and my children. We survive on our produce from the farm. My health has not been good; I needed medical care several times. I lived in a mud house with my children and

whenever it threatened to rain I feared a lot because my house could fall at any time. If it rained at night I kept awake until morning as I watched the house and my children. Luckily for me it collapsed on a day none of us was inside.

"I was worried about where my children and I would live. I rented a room from my neighbour so we could manage. I thought about what to do to build a house. I sold a portion of my land. I used half of the money for my daughter's treatment. She was very ill for several months. I used the remaining half to start the foundation of the house. In the process I ran out of materials. I was worried what to do next and I decided to ask for help from Makondo Health Centre. They assessed my situation and the land and checked the title deed. When they saw that all my documents were legal they helped me to complete the house. Now my children and I have a good house and I do not pay rent now. When I go to bed, sleep comes at once because I have a place to lay my head.

"I wish to thank Makondo Health Centre and the supporters for their kindness and for helping a widow like me. May God bless you."



Providing for a Global Mission

We are very grateful to our generous friends who made it possible for us to continue our work in the past year. We also thank all 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. We have included their contributions under donations.

Unspecified large donations received by Congregational Business Administration or the MMM Communications Department are allocated, after discussion, to places in most need.

Pie charts

The first set of charts shows the total income and expenditure for MMM for the works of the Congregation during 2014. In the last year, income from donations increased 6 per cent. We are deeply thankful to our donors who helped us to spread God's love and healing to many thousands around the world.

The proportion of income provided by funding agencies decreased 11 per cent from last year. The support from these agencies is still considerable and we greatly value our partnership with them.

We also wish to express our thanks to the various dioceses that support us each year through Mission Awareness. For this report, these are the Archdioceses of Dublin and Diocese of Derry in Ireland, several deaneries and dioceses in Scotland and England, and the dioceses in the United States that welcomed us through the Mission Cooperative Plan.

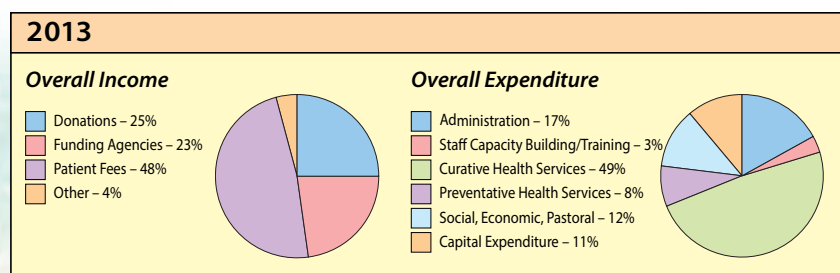
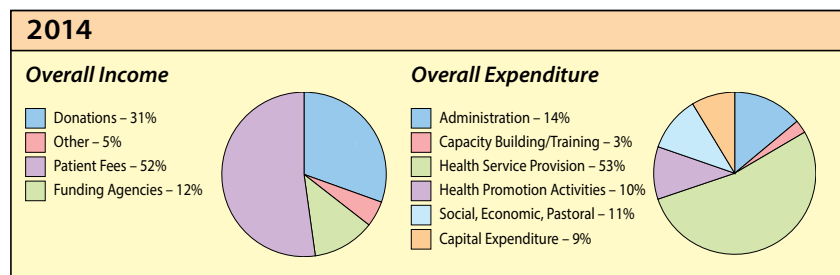
Those of you who have followed our financial reports over the past few years will see a change in wording for some of the categories in the pie charts. Under Health Services Provision we have included all expenditures involved in Curative Health Services. Percentages for Health Promotion Activities are for those activities involved in Preventative Health Services. This seems to be a more accurate representation of the costs involved. Some countries may 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, up-to-date equipment, and large quantities of drugs.

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

In the pie charts, "Other" refers to MMM General Mission Fund and bank interest.

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

Funding for MMM students in Nairobi, Kenya and those in initial formation in Ibadan, Nigeria is accounted for under the MMM Congregational Centre.



OUR PROMISE TO OUR DONORS

When a donor specifies a country, project, or special need (e.g. famine, 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 to our General Mission Fund, which pays for airfares, professional training of Sisters, and numerous other requirements overseas.



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".

Ireland

A current reality of life in Ireland is the increasing incidence of various forms of violence and intolerance towards others.



Sister Edel Tanner



Sacred Heart Residence.



Sister Helen Spragg



Our Lady's Hospice, Harold's Cross, Dublin

Living a healing charism in today's reality

Sister Edel Tanner entered MMM in 1961. After training as a nurse-midwife she was assigned to Brazil. She spent almost thirty years there as a nursing supervisor and also served as local bursar. On returning to Ireland she was nursing coordinator at Saint Patrick's, Kiltegan before being assigned to Rosedale Residential Home in Kilmacow, near Waterford. She spent six years there as a nurse and later administrator. Edel also nursed in our house in Clonmel, Ireland and our infirmary in Drogheda.

When MMM handed over Rosedale in 2012, Edel moved to our MMM community in Raheny, Dublin. She found this a big change. She was 73 and, realizing that she had no specific ministry, looked for voluntary work. Sybil Hill Nursing Home in Dublin is run by the Little Sisters of the Poor. Because Edel was a nurse, the Director of Nursing suggested that she help with feeding the patients. Now Edel also visits residents, many of whom are delighted to chat with someone from their home county. She does this work three or four days a week and says she finds it very fulfilling.

"I am so happy to be able to use the skills I have. Because of my training I am sensitive to the needs of the patients. I never find the hours passing."

Sister Helen Spragg is a healthcare chaplain in Our Lady's Hospice in Harold's Cross, Dublin. As part of the chaplaincy team she works with a religious priest, Brendan, and Liz, a married woman, who is a certified healthcare chaplain. Helen also works with hospice staff.

Before taking up her chaplaincy post she worked for twenty years in Africa. In Uganda she was a pharmacist in the busy general hospital that MMM ran in Kitovu. This was in the epicentre of the HIV pandemic before antiretroviral treatment was available. Helen then went to Rwanda as a development worker. She worked in communities that had been severely traumatised by the 1994 genocide. These experiences affected her deeply. She realised that people who have been severely traumatised cannot begin to better their lives until deep and painful wounds are healed. They need someone to accompany them and listen to them in their pain and suffering.



Peaceful grounds at Harold's Cross

Working as a health care chaplain has again bought her face to face with people whose lives have been devastated by illness. She has witnessed the strength and fragility of the human spirit. She is privileged to accompany people as they face loss at many different levels and to listen to them as they struggle to find meaning and to cope with their situation.

Helen says, "I have witnessed how people, supported in different ways by family, friends and/or by their faith, by past experiences and/or nature, have been able to recognise and draw upon their human and spiritual resources. I have seen how this has empowered them to bring hope and acceptance into their pain and suffering. I have witnessed how 'with God's power working in us, God can do much more than anything we can ask for or imagine (Eph 3:20).'"

England

“We affirm the energy and new life in our present and emerging ministries” (10th MMM Chapter).

In our house in Ealing, London, are four MMMs with wide and varied experiences of mission. They have brought these to bear on the ministries in which they are now involved, both in the life of the local area and in community.

Sister Ruth Percival trained as a nurse-midwife. She served for 21 years in Tanzania and participated in Mission Awareness in the USA. She also spent 11 years in Solihull, England, where she assisted refugees and asylum seekers.

Ruth moved to Ealing in 2013 and is now responsible for MMM Mission Awareness in England. She is a member of the parish Justice and Peace group, helps with a food Bank, and is a week day reader in church.

“I am delighted that we have been called by Chapter to the care of our Earth. I feel a responsibility to use our unique experiences to speak for those who have only known war, fear, hunger, thirst and loss.”

Sister Mary Molloy trained as a surgeon. She went to Africa in 1970 and spent over 25 years in Nigeria, 11 years in Angola, and 3 years in Ethiopia. Her work involved medicine, paediatrics, obstetrics and gynaecology, as well as surgical duties.

She has been in Ealing since November 2013 and helps with shopping and cooking in the community. She enjoys participating in Gregorian chant and knits socks and neck warmers for merchant sailors in the Apostleship of the Sea in Ealing Abbey.

After reading more recently about the early days of MMM, Mary would like to get involved in a ministry helping women who are suffering after undergoing abortion.

Sister Mary Shephard trained as a secretary and served in the IMTH and the maternity hospital in Drogheda. In 1962 she was assigned to Nigeria. Unable to return after home leave because of the war, she was assigned to Pope John Seminary, Weston, MA, USA. She was then Regional Secretary in the US and also worked in the Nunciature in Dublin.

Mary was again in New York from 1992 until 2009, when she went to Ealing as Local Bursar. She helps with community duties and hospitality and is a Eucharistic Minister in Ealing Abbey. She also attends a weekly John Main Meditation Group.

“As a community we are very aware of the needy and suffering around us. We support and try to attend all that the Abbey sets in place to help.”

Sister Maureen Clarke was sub-editor of the MMM Magazine before studying Social Science. Assigned to Kenya, she was co-ordinator of development projects run by local Kenyan women. She later returned to England and worked as an Approved Social Worker for mentally ill patients.

After assignment to Ealing 22 years ago, Maureen did a counselling and psychotherapy course and was asked to be a founding member of the Ealing Abbey Counselling Service. She served in MMM leadership. She is now a Eucharistic Minister, the UK MMM Safeguarding Representative, and mentor for four Associates. She keeps in touch with the Medaille Trust, which helps victims of trafficking.

“Little did I know what a gift God was giving me in this MMM vocation. I have learned so much from other missionaries, from our devoted supporters and from the people we have served.”

As members of a faith community, MMMs and Associates are concerned about the situation of migrants at Calais wishing to cross into England. While mass migration is a complex issue, many are fleeing conflict or are victims of trafficking and need to experience our compassion.



The MMM community at Ealing with Sister Helen McKenna (Back left), now based in Tanzania



Sisters Maureen Clarke and Ruth Percival are involved in a number of ministries.



Liturgy at Ealing Abbey: The MMMs are very involved in parish life there.

The USA

A challenge encountered by a US MMM Associate is meeting the needs of women who die in prison. At mid-2013, an estimated 2.3 million people were behind bars in the USA, the world's largest reported incarcerated population.



Sister Kay brings many gifts and much experience to her new role.



MMM Associates Joan Gagnon, Kathleen Albee (AMMM Leader) and Ann Hook with Sr. Kay Lawlor



Front L-R: Anne Marie Kenny, Sr. Anne Marie Hubbard, Marianne Grisez, Kathleen Albee. Back L-R: Barbara Sullivan, Joan Gagnon, Ann Hook, Sr. Kay Lawlor

Sharing the gift that God offers us

In recent years, we have welcomed many Associates of the Medical Missionaries of Mary, women and men who feel called to embrace the gift of the MMM charism. It can be any adult, single or married, male or female, who feels drawn to our spirituality and mission.

Most of these dedicated people continue their ordinary lifestyle and work. Associates who live near each other sometimes arrange to meet for prayer and support. Some make good use of modern technology to stay in contact. Others may work with the Sisters in other countries. Some are able to arrange supportive visits to our missions.

MMM Associates in the USA come from a variety of backgrounds, with a wide array of talents and interests. They live our MMM charism using their unique gifts. They have been involved in helping low income women set up in business, in training our co-workers in medical techniques, and visiting detention centres for migrants. A committed group prays for our Sisters. Another AMMM works with a team of volunteers at a state women's prison to train inmates in the care of inmates who are dying and those with special needs.

Sister Kay Lawlor recently took over the role of MMM Co-ordinator of the Associates in the USA. She wrote about how her new work is evolving.

"In late 2013, I returned to the US after over thirty-five years in MMM ministry in Tanzania, Kenya and Uganda. I was asked to take over the role of MMM Co-ordinator of the Associates in the USA following my time of renewal. Because I had been actively involved with the group of AMMMs in East/Central Africa, I was excited about the proposal and looked forward to meeting the American group. I took over from Sister Anne Marie Hubbard on the Feast of St. Benedict, 11 July 2014 and have been learning ever since. I have learned about the growth of AMMMs in the USA and also have been learning my own role.

"The first AMMMs in the USA, Anne Marie Kenny and Nancy Hinds, made their Covenants on 1 October 1999. There has been steady growth since then and today there are thirteen AMMMs in the US and one woman in the Orientation Program.

Despite the large distances between them, they have a strong bond and participate in several service opportunities. Many attend our Area Assembly or National Meeting. Their commitment to living the MMM charism in their daily lives, their concern for one another and for MMMs, and their strong desire to grow in union with God are all signs of a vibrant movement.

"My role as MMM Co-ordinator is evolving. From the beginning of the Associate Movement in MMM, our desire was for the Associates to develop the movement from within. This is happening increasingly in the US. While my work involves co-ordination and support, I am trying to listen to the Spirit speaking through our AMMMs. Only in this way will we truly be the gift that God intends."

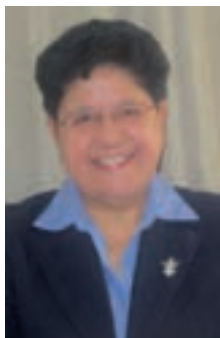
More news from the USA:

After thirteen years of dedicated work in our Mission Development Office in the USA, Sister Mary Ann MacRae, from Seattle, WA, has been elected to our new Congregational Leadership Team (CLT). Replacing her in Chicago is Sister Joanne Bierl, from Buffalo, NY, who has just completed six years' service on the CLT. We wish them both well in their new work.



Sister Joanne

The call to be an MMM Associate



Connie Salvidar is an MMM Associate. She works in our MMM Development Office in Chicago. Connie told us what being an Associate means to her and about a life-changing journey she made to Honduras.

"I was attracted to becoming an Associate from watching the Sisters help others and inviting me to do the same. I liked doing mission awareness in parishes and introducing myself as an Associate rather than an employee. The Sister in charge of one parish asked that I explain what an Associate is because the Church needs more lay people.

"I went to Honduras in March 2015 to experience missionary work and meet the Associates there. I was born in Mexico and speak Spanish so communication would be easy.

"I visited the house in Choloma where Sisters Rosalinda, Renee and Danielle live and met the *Casa Visitación* staff. They offer ear cleaning and massage; a lawyer helps in workshops; the driver takes the Sisters to the mountains. Oscar does maintenance; Associate Sirleny helps in the office; Associate Lillian does reflexology. Roger teaches children in day-care; Sandra is a psychologist.

"I saw the new MMM house in Siguatepeque where Sisters Bernie and Cleide live. We visited families for whom the Sisters provide nutrition bags and medical supplies.

"In one of them, Cecilia (not her real name) is twenty-two years old. She was raped twice by her uncle. The Sisters found out about her after visiting her blind grandfather. The family is very poor with one bedroom for everyone, including parents and brothers. Cecilia is very happy because the Sisters built a bedroom for her and took her to the doctor to get some vitamins. The pastoral care team visits every two weeks."

I will not be the same

"I learned so many things from this visit. I saw that our poverty in the more "developed" world is poverty of spirit. In Honduras I noticed that people often have courage to work harder than we do because of the conditions in which they live. They fight just for survival, to be safe from violence; to struggle with and accept an illness. They travel on foot, by bus, on bad roads to visit someone and enjoy it. Sometimes I barely have time to make a phone call. Their happiness is being together and sharing the small bag of food brought to them, not getting more 'stuff' that we don't need from the stores. They were so grateful for the few minutes we shared with them.

"Although I found it difficult to witness their poverty, these were people of faith who have placed their trust in God. They live in poverty with dignity. It is impossible to help everybody but I learned that we start by doing what we can with what we have and it does not have to be a major thing.

"The MMM Sisters are a great group of women. I am blessed to be around them because they have shared one of their most precious gifts: their dedicated lives to help others, the poor and sick and especially us, who want to be better people."

MMM Associates "hear a call to a global healing mission to explore with us a new dimension of their Christian commitment in a way that respects the uniqueness of their own vocation, their life choices, and commitments" (Introductory handbook, *Come, Let Us Listen*).

The first Associate Medical Missionaries of Mary (AMMMs) made their Covenant in the USA in 1999. Today there are almost 120 MMM Associates in sixteen countries.

"We call ourselves to find creative ways to mutually deepen and share our charism with AMMMs."

10th Congregational Chapter



Visiting a family with Sr. Cleide, MMM (centre) and Reina, an MMM Associate from Honduras (back)



Women share experiences in a support group



Group work at a self-esteem workshop



Women learn vegetable pickling as an income generating project.

Because of YOU

In Tanzania

In the Faraja Community-Based Health Care Centre, many staff members were able to have training:

- 7 attended Resource Mobilisation training conducted by Tunajali.
- 6 attended gender training in Morogoro.
- 80 volunteers were trained in home-based care (HBC), palliative care and outreach programmes.
- 3 attended a planning and budgeting course in Dodoma.
- 5 new volunteers attended HBC training in Singida.

Monthly meetings for volunteers are also used to build capacity and cover a variety of topics.

In the Faraja Centre Hospice & Palliative Care (PC) Programme

- 94 people were accepted in the programme for palliative care services. [See story page 17.](#)
- Nurse Amina Kimashalo attended a 1-month course and practicum given by Selian Hospice, in conjunction with ALMC.

In Uganda

Makondo

Materials for a new latrine were provided for Mrs. Gertrude, a widow with four grandchildren. "Whenever I left the compound, leaving my grandchildren behind, I would be very worried about one of them falling into the pit latrine, especially the 3 ½-year-old. They were always suffering from stomach ache and diarrhoea."

Community members helped in construction. "Now the hygiene around my home is good. I no longer worry about my grandchildren because the latrine is well built. I am grateful for the supporters of this project. There were many who were like me or worse but now have well-constructed latrines. On behalf of my community I appreciate everything and pray that you continue with the heart of helping the needy." [See story page 18.](#)

Kitovu

A report from Saint Anne's Obstetric Fistula Unit in January 2015 took note of the accomplishments of the past ten years. These included a total of 2,615 operations, including 1,561 for fistula repairs. There are many aspects to this programme and we are grateful for equipment and drugs that have been provided by local and overseas supporters.

Passing on skills is integral to the service. In the first decade, 65 doctors, 32 anaesthetic assistants, 34 theatre nurses, and 46 ward nurses were trained. Regular repair camps continue to be held.

In Brazil

With the funds raised by one donor, a new playground is being built at *Ninho da esperança* (Nest of Hope), a day centre run for people with autism and their families in a very poor area of São Paulo. [See story page 7.](#)

In Nigeria

At our fistula unit in **Mbribit, Itam** for women with vesico-vaginal fistulae, 44 women had repair operations at a camp held in September 2014 and 38 had operations in January 2015. These women have had their dignity restored and have been able to return to their families and communities. Others were referred on for treatment or were given advice for different conditions.

Preparation for mission

A number of **MMM students** were able to complete their studies because of sponsorship by donors or with funds allocated for this purpose from your donations.

[See News and Events on page 26.](#)



Obituaries

"I go to prepare a place for you" (Jn 14: 30).

Sister Barbara MacNamara, MMM



Sister Barbara was born in Limerick in 1926 and joined MMM in 1945. She trained as a nursing tutor. In 1954 she was assigned to Anua, Nigeria, and taught for 8 years. After 3 years in administration, she was principal tutor in the IMTH School of Nursing. Barbara also served for many years in MMM leadership. She guided MMMs after first profession and was a kind and compassionate mentor.

Barbara trained in leadership and pastoral studies and for over 20 years helped in the spiritual and psychological development of MMMs and many other groups. When her health declined in 2013, she moved to Aras Mhuire, where she died on 14 May 2015.

Sister Attracta Scanlon, MMM



Sister Attracta was born Bridget Scanlon in County Sligo in 1919 and joined MMM in 1940. She trained as a midwife and was assigned to Naples, Italy in 1952. For 25 years she was in charge of the labour ward and maternity. In 1979 Attracta was assigned to Kenya and served for over 20 years in Kipsaraman and Kitale. She taught countless women the care of mother and child, trained traditional birth attendants, and provided hospitality to many visitors.

Sister Attracta returned to our Motherhouse in 2000. She moved to Aras Mhuire in 2010 and died on 24 May 2015.

Sister Johanna Power, MMM



Sister Johanna was born in Wexford in 1924 and joined MMM in 1944. She trained as a nurse-midwife and served for 2 years in Angola. After 8 years in the IMTH and maternity hospital in Drogheda, she worked for 5 years in Nigeria and did Mission Awareness in Ireland and the USA.

Johanna also spent 23 years as a nurse in the USA and was a chaplain in Massachusetts General Hospital. She returned to Ireland in 2003, moving to the Motherhouse in 2011. She later moved to Aras Mhuire, where she died on 24 June 2015.

Sister Philomena Rooney, MMM



Sister Philomena was born Bridget Philomena in County Down in 1927 and joined MMM in 1954. She studied commerce, cookery and household management and worked in the hospital kitchen and laundry in Drogheda for 9 years. She spent 10 years in Spain before training in dressmaking and community development. In 1976 Phil was assigned to Kenya, where she served for over 20 years - with women's groups, in community development. She also taught catechism and did pastoral work.

Sister Philomena returned to Ireland in 2003. In 2005 she moved to the Motherhouse and to Aras Mhuire in 2010. She died on 29 June 2015.

Sister Bernadette McConville, MMM



Sister Bernadette was born Josephine McConville in County Armagh in 1929. She joined MMM in 1948 and worked on the MMM magazine before assignment to Nigeria in 1954. She spent 16 years there as a secretary and bursar in several missions. She then completed studies in social studies and West African Studies.

Bernadette spent 5 more years in Nigeria as an administrator and then as Director of Development for Ogoja Diocese. After Pastoral Studies in the USA she spent 2 years in administration in Nigeria. She also served for 17 years in New York, USA as regional and inter-area bursar. Sister Bernadette returned to Ireland in 2006. In 2015 she moved to the nursing facility in Aras Mhuire. She died on 17 August 2015.

Sister Maura O'Donohue, MMM



Sister Maura was born in County Clare in 1933 and joined MMM in 1950. She qualified in medicine and worked in Nigeria. She served in MMM leadership and then went to Spain to re-qualify for the Spanish Register. She again served in MMM leadership.

In 1974 Maura went to Ethiopia. She completed a Masters in Community Health and returned to Ethiopia, as co-ordinator of a mission project and of nutrition and famine relief at the Ethiopian Catholic Secretariat. She was AIDS Programmes Co-ordinator in developing countries and Health and Nutrition Advisor at CAFOD. She also worked at the Catholic Medical Mission Board in New York. Maura worked on human trafficking issues for MMM. Sister Maura became ill in 2014 and moved to Aras Mhuire, where she died on 3 May 2015.

Sister Jean Clare Eason, MMM



Sister Jean was born Elaine Eason in Buffalo, New York in 1941. She joined MMM in 1959 and trained as a dentist. In 1970 she went to Nigeria and served there for 9 years. She was then MMM leader for USA/Brazil.

After retraining as a social worker Jean spent 8 years in Clinchco, Virginia as a legal advocate for marginalized groups. She worked for 6 years in Brazil in pastoral work and alternative health care. She served in Congregational leadership and in 2009 became Area Leader for the Americas, based in Brazil. Jean returned to the USA for health reasons and died in New York on 9 April 2015.

"From the very beginning of our religious life we shall ask Our Lord to let us realise the truth, the secret of the life of our model, Jesus. He lived completely for God, always doing God's will, glorifying God in all he did with a heart of love, the source of all his virtues, activities, sufferings and death on the cross."

Marie Martin to Miss Leydon and Miss O'Rourke, 1935

News and Events



Sister
Chibuzo Aloka



Sister Chiagoziem
Onwuzuruike



Sister
Helen Omeya



Sister
Margaret Nakafu



Sister Miranilza
dos Santos



Sister Evelyn
Akhalumenyo



Sister
Clara Chikwana



Sister
Martine Makanga



News of our Students

Several MMMs are finishing their studies in Nairobi this year. Sisters Miranilza dos Santos, Chibuzo Aloka and Margaret Nakafu completed BAs in Sustainable Human Development at Tangaza College in June 2015. They are assigned to Brazil, Nigeria and Honduras respectively.

Sisters Chiagoziem Onwuzuruike and Evelyn Akhalumenyo will finish their medical studies at the University of Nairobi in December. They will then have a one-year Internship before further assignment.

In Dublin, Sister Clara Chikwana completed a one-year Master's in Theology at Mater Dei Institute of Education in August 2015. She has gone to the MMM International Novitiate in Ibadan, Nigeria.

In Belgium, Sister Doctor Martine Makanga successfully defended her thesis to obtain a Doctorate in Biomedical and Pharmaceutical Sciences on 16 March 2015. She obtained her PhD from the Free University of Brussels, Faculty of Medicine. On 29 April she held the public defence of her thesis. (See MMM May/June 2015 e-newsletter.) Martine is assigned to Kenya.

Sister Helen Omeya completed a one-year programme in religious formation ministry in Loreto House, Dublin. She will be completing further studies in Tanzania.

South Sudan

In a simple and meaningful celebration, our MMM community in Wau celebrated the blessing and laying of the foundation stone of the MMM Healing Centre on 2 July. The Centre will consist of Primary Health Care and Social Departments to meet needs such as trauma counselling, youth activities, and possibly literacy education.

The stone bore the words "Rooted and Founded in Love." We pray that God will extend healing to this country that has been devastated by conflict for so many years.



Sr. Josephine Nabisere at the blessing
with the Vicar General and MMI Fathers

At the Motherhouse in Drogheda

At the end of May, the Knights of Columbanus and the Religious of Drogheda organised a Camino, or pilgrimage. They invited pilgrims to visit seven of the churches in the town. People were assigned to welcome them, pray with them if requested, and give a brief history of the particular church.

At Our Lady of Lourdes Church near our Motherhouse, we invited them to visit the Mother Mary Martin Room and the room illustrating our work. Local people told many stories of the early years of MMM. About eight hundred did the pilgrimage and eighty people visited the display rooms in the Motherhouse.



The town of Drogheda with the River Boyne

Meeting of Associates

Our MMM Associates (AMMMs) met from 14 to 17 May at our house at Ngaramtoni, Tanzania. Dr. Eamonn Brehony, AMMM, facilitated the meeting, which was attended by eight MMMs and seventeen Associates, men and women. They currently live in Uganda, Malawi, Kenya, Rwanda and Tanzania and represented the thirty-five Associates in these countries.

Sister Geneviève van Waesberghe gave a presentation about Mother Mary Martin and Benedictine spirituality for the opening session. The delegate Associates from each country showed the work in which they are involved in living out the MMM healing charism.

News and Events

A ground-breaking Statement

A very special event took place in Geneva, Switzerland on 17 June 2015. MMM joined VIVAT International and Franciscans International in sponsoring a Statement on the issue of Obstetric Fistula at the 29th Session of the UN Human Rights Council. As part of interactive dialogue with the UN Special Rapporteur on the Right to Health, this was the first time that fistula was presented to the UN as a human rights issue; previously it was presented only from a medical perspective.

The Statement said: "Given that this session of the Human Rights Council features a number of important discussions on the universal rights of women we think it is important to raise the issue of maternal healthcare, specifically pertaining to obstetric fistula....

"We commend the proactive initiatives several UN bodies have taken to combat this issue. However, we believe that further measures can be taken to improve maternal healthcare systems, particularly in regions with significant rural populations, as is the case in many parts of Sub-Saharan Africa. Awareness programs on the risks of early pregnancy and education about proactive prenatal care can greatly reduce the occurrence of this condition. Obstetric fistula is preventable and with increased global cooperation and targeted resource allocation, the international community can make significant steps towards eradicating it in the coming years." More details can be found in the *MMM e-newsletter* September 2015.



Fistula theatre in Itam, Nigeria

A special award



Sister Maura and Irish Ambassador Anne Webster

Sister Doctor Maura Lynch was a recipient of the 2014 North-South Prize on 1 July, along with Mr. André Azoulay of Morocco. Irish Ambassador Anne Webster nominated Doctor Lynch for this award, which has been given since 1995 by the North-South Centre of the Council of Europe to two candidates who have stood out for their exceptional commitment to promoting North-South solidarity.

The President of the Republic of Portugal, Professor Aníbal Cavaco Silva, presented the prize in Lisbon at the Assembly of the Portuguese Republic. The award website noted that "after 20 years in Angola and more than 20 in Uganda, Dr Lynch continues to perform life-changing surgeries to treat obstetric fistula...at Kitovu Hospital in southwest Uganda...She keeps working with determination for those Ugandan women, fighting for their right to access health care, for their dignity and in some cases for their life."

In her acceptance speech Doctor Maura mentioned the case of an 85-year-old woman she treated only last year. Leaking urine since birth injury forty years previously, she had also lost nine children. "Can you imagine the joy of new life, dignity and self-worth this dear lady enjoyed on full restoration of health and continence, following surgical repair? She and I danced together!"

Today in 2015, birth injuries should not occur because all are preventable...Yet "in Uganda the most recent surveys quoted 142,000 sufferers of fistula – mostly VVF with 5% RVF as well. Some 10% also have sciatic nerve damage resulting in 'dropped foot', or inability to raise one or both feet in walking."



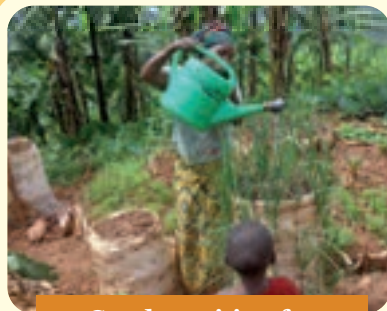
VVF Unit at Kitovu

May 23 marks International Day to End Obstetric Fistula.

To our wonderful friends and supporters



Transport for
health workers



Good nutrition for
families



Holistic health care
for children

*If you only knew
the gift that you
are offering...*



Advocacy for
human rights



Clean, accessible water



Solidarity with the
marginalized

MEDICAL
MISSIONARIES
of MARY

MMM COMMUNICATIONS
ROSEMOUNT
ROSEMOUNT TERRACE
BOOTERTOWN, BLACKROCK
CO. DUBLIN, IRELAND
Tel: 353-1-2887180
Email: mmm@iol.ie

MEDICAL MISSIONARIES OF MARY
DEVELOPMENT OFFICE
4425 W 63rd St, Ste 100
CHICAGO, IL 60629-5565
USA
Tel: (773) 737 3712
Email: development@mmmusa.org

Find out more at:

www.mmmworldwide.org