

# MEDICAL MISSION NEWS

Spring 2013



## *Children*

*Children are God's most sacred surprise,  
a light in the eyes, a lift to the heart, a storyline's continuation.  
Children mirror mystery. Children are God's preferred way of being,  
preferred way of seeing the world and its people.*

*Our children are not our children. They are given to us and pass  
through us into worlds of their own making, into risks of their own taking,  
into futures we will not know.*

*When children cry, when children die, the whole world is diminished,  
for a child's pain is the earth's pain, and when an innocent  
child is abused none of us is ever the same again.*

*When children are simply children, filling their day with life spilling over,  
sharing love, sharing laughter, grabbing the whole of their once-upon-a-time,  
making us believe in happy-ever-after, anything at all is possible.*

**A Psalm about Children by American MMS Miriam Therese**



*Present  
with  
love*

**Colombian MMS Maria Fernanda writes about her work with children:** Working as a doctor in the area of armed conflict in Colombia, I spent most of the time caring for children who were victims of war and those forced to be child soldiers. These children changed my life. Forced to leave their families to learn how to cause pain to others and to remain in the ranks of rebel movements that they could not understand, their cry called me to a more radical commitment to the Gospel. As a Medical Mission Sister, I worked at a government hospital in Peru where, every day, children from Pachacutec came in a very poor condition and dying of simple diseases. Pachacutec was an area with poor roads, no basic services, houses of mat, wood and cardboard, rubbish and vermin everywhere and extreme weather in summer and winter. With another MMS we started giving medical care to children and helping people to see the need for prevention of sickness. There was a real need for children with disabilities and, together with another congregation we started a project giving needed therapy for ten children and gradually for many more. It was painful to know that before this many were “hidden” in their homes.

People now come to share the joys and sorrows of everyday life, not just for medical help. Extreme poverty has many faces. Some very difficult to deal with. But I believe I am called to be present with love, often without answers and to face my own helplessness, pain and frustration when I see the very difficult situations that families have to go through. How do I speak of a God who loves them deeply when they suffer so much? Gradually I found out how to do it. Even in the midst of the situation in which they live we can experience a loving God who joins us on the journey, who motivates us, challenges and comforts us.

The families have organised themselves in an Association of Parents of Children with Disabilities and this has made them feel that they can fight for the rights of their children. Our project has tried to link the government and NGOs, the local community and Catholic and other groups of Christians. We have learned a lot from it.

# *The hope generation*



## ***German MMS Ursula Maier tells us about very vulnerable children in Ghana.***

In Ethiopia I learned to cook special food for malnourished children. When I first started work in the children's ward in Techiman, Ghana, we had only a few malnourished children. However after great success with two children, one who was six and weighed only 7kg and one nine weighing 13kg, more and more started coming to the ward with malnutrition. Techiman has an HIV rate of 9% and children living with HIV come in with half their normal weight. Often they died with this condition and half of the malnourished children here are suffering from AIDS. One child of 7 months weighed only 2.7 kg. The father had told the mother that the diagnosis was wrong, so she had to stop the preventive treatment for the child. Now the mother is learning more about the sickness and will start a mothers' group to support mothers with similar stories. She is visiting and talking to mothers with children who are living with AIDS and have been admitted in the ward.

We are going to start a youth group for children between 6 and 14 years living with AIDS. We want to strengthen them, give them knowledge, support them in taking the lifelong medicine and enable them to say "no" to sex despite high peer pressure in the schools. They call these children the "hope-generation" because there was no medicine for them but now they are surviving with the medicine, high-energy food and infection treatment.

I enjoy teaching young doctors and helping them learn to value handicapped children, to show concern for the mothers, families and social problems. We often have discussions about our different backgrounds and beliefs. One doctor said that he learned first to approach and appreciate the child before examining him or her. Some doctors even phoned from villages to ask for the recipe for the food for malnourished children. This is only a little about what is happening in the children's ward but there are so many other stories, struggles, happiness and growth.



## *With challenged children*

### ***Dutch MMS Christianne works with families with challenged children in Lima, Peru.***

With the help of a Peruvian NGO, a Dutch NGO and some volunteers, we are bringing therapy closer to where the families live to promote community-based help. I remember Derick, six years old, walking by hanging on to things like cupboards, tables and chairs. He couldn't speak and was very spastic, having little control over his arms or legs. A colleague invited him for a handicraft class to help focus his movements. He was an eager student. He had been rejected from several schools because of his uncontrolled movements and the sounds he made when he got excited which frightened the other children. We managed to get him a walker but after two months he didn't want to use it. His mother told us that he still frequently falls but simply stands up and goes on. We see that his walking is more and more stable. Because of economic help from a Dutch NGO he now has regular therapy and is improving a lot.

Then there is Anthony. When he was seven, he had an eye infection and then lost his speech and his arms and legs became paralysed. He now gets regular physiotherapy and speech therapy. We have seen little improvement but at least no further deterioration. Without therapy he would have become much worse. Recently his mother agreed to consult a good neurologist to see what he thinks of Anthony and his possibilities.

I think of Heiner, a boy of seven with spina bifida who had lived with his mother in a very remote village in the mountains. He could not retain what was taught to him and was too old for kindergarten. He was accepted into a programme for First Communion because he was so friendly and patient. A psychologist worked with him for a while and he is slowly learning to read, write and do sums.

I am deeply moved by all the loving care given by parents, aunts and grandparents. They are the saints of our times. We share the joys and sorrows, our skills and experiences. Thank you Derick for teaching me to stand up after falling and to walk without crutches and in the process to find my own balance. Thank you Heiner for remaining so friendly and patient, what I often miss doing. Thank you Anthony and your mother for your persistence and for not getting discouraged when hardly any improvement is seen.

# *Quality education on low income*



## ***Peruvian MMS Marisol's life has been changed by an educational project in Arequipa, Peru.***

As a response to chronic malnutrition in children and to help the families in this low-income area, a breakfast program was started in 1980. Ten years later, many of these children were ready for higher studies and some were parents of a new family. Due to good nutrition and family orientation, family life and the intelligence of the children had changed for the better. We felt responsible to continue to help these young people from underprivileged families who could not pay for a higher education.

Medical Mission Sisters started a day care centre for the small children so that the mothers could work without worrying about their care and a trade school for the young people and adults in the same building. The educational centre received official recognition so the Department of Education pays the salaries of four teachers. Until now, the kindergarten continues to provide quality education for children up to five from families on low income. Many come from homes where there is domestic violence, where there are single mothers or where both parents need to work or study to provide for their children. The children receive an excellent education, balanced meals, computer learning and psychological support for the child and the family. At present 130 children are enrolled.

This project which began nineteen years ago and continues to develop and improve the quality of education of young children, inspires me to dedicate my efforts to improve the preschool education programs, the in-service preparation of the teachers and the moral and psychological support of the parents in their daily struggle to better their families.





## *Helping young people to live more responsibly*

***The rate at which teenage girls were having abortions had become very alarming in Sunyani, Ghana. Ghanaian MMS Florence, with Kenyan MMS Lillian and German MMS Ursula started giving sex education and counselling to young people.***

***Florence tells us:*** We have organised a number of workshops in some schools and counselled a lot of young people. The most inspiring thing for me was one day one of the young people said “Thank you, sister, for listening to my story. At least today I have spoken to a real human being because for a long time now I have been talking to my mobile phone, recording what I want to say to someone and afterwards I play the message and listen to it.”

Another touching story is about a young woman who was pregnant and wanted to have an abortion. However after a number of counselling sessions, she decided to keep the baby. Thanks be to God she delivered a handsome baby boy and is now in school again. These young people feel free to come and share areas of their lives with us that they would not share with anyone else. We hope and pray that the sex education is helping the young people to live more responsibly, thus helping to reduce the rate of teenage pregnancy.



## *Promise and hope of India*

### ***Indian MMS Sabitha celebrates Children's Day in a new way.***

India is still young; 50% of the population is below 25. Children and young people are the promise and hope of family and country. The integrity of families is being disrupted, resulting in many problems. Children are being brainwashed by the media and modern technology, not only in cities but also in rural villages. For Children's Day we involve the children from local villages to create awareness of subjects like cleanliness, promotion of the environment, development of talents, culture, unity, values and the negative impact of drugs. Initial preparation is done in the villages, then we bring the children together and they use their talents through drama, songs and speeches. There are prizes for those who perform well. About 500 children gather for this.

For environmental protection we created awareness of the need to plant, not cut down trees. Our women's group also took part with the children who have started planting trees at their schools and in villages. I am inspired by the transformation of the children. It enables me to go forward with hope and strength.



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## OBITUARY

*Miss Anna Cecilia Byrne, Pembroke*  
*Mrs Joan Burns, Stroud, Gloucestershire*  
*Mrs Nicole Haslehurst, Louth, Lincolnshire*  
*Dr W G Keane, Dartmouth, Devon*  
*Mrs Helen Jones, Sandy, Bedfordshire*  
*Mrs Nora Gleeson, Walton-on-Thames, Surrey*  
*Mr Peter Horsfield, brother of Sister Gill,*

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## A LIVING LEGACY

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*All correspondence regarding wills to be sent to 109 Clitherow Avenue, London W7 2BL*

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*Thank you for your support and concern. Please pray for Medical Mission Sisters working in: Belgium, England, Ethiopia, Germany, Ghana, India, Indonesia, Italy, Kenya, Pakistan, Peru, Philippines, the Netherlands, Uganda, USA, Venezuela.*

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## Contact Medical Mission Sisters at:

109 Clitherow Avenue, Hanwell, London W7 2BL  
mmsukoffice@aol.co.uk

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