Because You have removed the stone that was rolled over our hearts and WE ARE RISEN.

Because of you, young women in Honduras dance for joy.
Dear Friends,

Once again we are celebrating the glorious feast of Easter. Jesus has triumphed over death and has sent His life-giving Spirit to be with us always. He tells us that His Spirit is one of love and healing.

This year marks seventy-five years since the foundation of the Medical Missionaries of Mary. When Marie Martin made her profession of vows in April 1937, she was not only breaking new ground for women religious in the Church. She was starting a process that, with your support, would bring life to countless thousands of people around the world.

Marie’s vision was to bring the love of God to others through a ministry of healing. As a lay missionary in Nigeria, she had witnessed the need for medical services, especially for women in childbirth. Nevertheless, the way forward to meet this need was often unclear and full of obstacles. One obstacle was the Code of Canon Law issued by the Church in 1917. It forbade women religious to practice obstetrics or surgery.

Marie went down many paths to discern where God was leading her. She helped to found another missionary congregation for women, applied to enter the Carmelites, and tried a secular institute. Only a year before establishing MMM she wrote, “Please pray for me. I am in absolute darkness with absolutely nothing but a firm hope and trust in God”.

Finally, on 11 February 1936, a new Instruction was issued from Propaganda Fide in Rome encouraging the foundation of new religious institutes of women dedicated to medical work, especially for women and children. Now ‘the stone was rolled back’. Soon Marie and her companions were travelling to Nigeria to found the Medical Missionaries of Mary. Significantly, Marie’s dream was realized on the Octave of Easter 1937.

This supplement presents some highlights of the story of MMM. It is the story of women who have shared Marie Martin’s vision, and who, like her, have continued to break new ground to bring hope and healing to those most in need. Thank you for sharing that vision with us.

Very best wishes for a joyful Easter.

Heal the world. Make it a better place
For you and me and the entire human race.  

Sister Carol Breslin, MMM

These children hope for a better future in South Sudan. Soon, with your help, MMMs will begin to bring this about.

Celebrate 75 Years on Mission
In our early days the most urgent health need was to establish hospitals and clinics for curative and preventive health services. We prepared many young women (and men as well!) as nurses and midwives. Many went on to become leaders in their professions and brought about a better quality of life in their communities.

MMMs often established facilities in remote areas where travel was difficult and brought basic maternity and child health services to outstations many miles from base.

MMMs have continued to respond to new needs in the world of healthcare. When priorities began to shift and the importance of disease prevention was emphasized, many became pioneers in primary health care. They developed innovative materials for teaching and helped communities to become responsible for their own health.

In the early 1980’s the world became aware of a new health issue: HIV. The effects of the virus were devastating for the communities in which we worked. Early on, MMMs established counselling, testing, and social service programmes for those affected and their families. Many of these became models of care in their countries and were copied to have a multiplier effect. Staff raised awareness, found support for orphans, and cared for the dying in their homes. We developed innovative approaches in education for behaviour change. We provided counselling for the deaf and education materials in Braille.

When HIV treatment became available we worked with governments to facilitate access to antiretroviral drugs.

St. Mary’s Hospital in Ibadan, Nigeria provides general medical services in an overcrowded urban area.

Malawi: Using simple local materials for clean water

In Malawi: Getting to hospital by bicycle-ambulance.
In the past seventy-five years our work has been with many on the margins of life, such as those affected by Hansen’s Disease (leprosy). MMMs have developed model programmes to integrate treatment services for this condition, now completely curable, with those for tuberculosis.

MMMs started treatment centres that continue to bring new life to women affected by childbirth injuries, especially vesico-vaginal fistulae (VVF). Without maternal care this condition causes terrible suffering, usually with the delivery of the first baby, who is usually born dead. Often teenagers, these mothers are ostracized from their communities and have no means of livelihood.

For many years HIV ministry meant constantly dealing with the dying in very poor circumstances. MMMs trained and became experts in palliative care, alleviating pain and helping people to die with dignity. [See story overleaf.] The recognition of the overlap of HIV and cancer also led to our involvement in Hospice, providing holistic services to clients and their families. Sisters were trained in clinical pastoral education (CPE). Some were pioneers in establishing CPE teaching programmes and many provided hospital and clinic chaplaincy services.

In places where dealing with infectious diseases claims much of the health budget, mental health is another area that is often neglected. The issue is compounded by fear and misconceptions and those affected are often put on the fringes of society. Not content with this reality, MMMs trained in the mental health field and began much-needed services in these countries.

“…so let this be an MMM virtue: first of all with us must come God’s sick poor.”

Mother Mary Martin
Supplement to Healing & Development

Sr. Carla Simmons is a physician who has specialized in Palliative Care. Working with a team in Kitovu, Uganda she helps to bring relief to people with life-threatening illnesses such as cancer and AIDS.

We receive new patients every week, sometimes every day. We see them first in the hospital, start them on oral morphine to manage their pain, and get directions to their homes so we can follow them after discharge. Home visits give the opportunity for more intense counselling for both patient and family.

Today when we finished in the hospital, we went to visit a man with cancer of the tongue, a terrible tumour, getting bigger. He has seven beautiful children. His wife was sitting with him, nursing a baby of nine months. It would break your heart. He asked if there was an operation for his condition, but we had to explain that removing the tumour would involve taking away his whole jaw. Fortunately, his pain is well controlled with oral morphine. He is sleeping well and can still manage to take fluids. As usual, we gave sweets to the children and food for the family.

Then we went to see an old man with cancer of the prostate, referred to us by the doctors in Kitovu Hospital. We had to leave the car at the bottom of a hill and walk straight up for about ten minutes. When we finally arrived, I asked the neighbours how the patient managed to climb the hill when he came home. They proudly showed me a new plastic armchair and said that they had carried him up in it. Such ingenuity!

The last visit was to a woman with very advanced cancer of the ovary. She lives with her brother and a daughter cares for her. The tumour is pressing on her bowel and causing obstruction so we treated her with steroids and hope this will give her some relief. We asked if we could pray with her. A group of visiting women had just finished the Rosary and they said they pray with her every day. The parish priest has come several times. This is very encouraging because the woman lives deep in the village.

As I write this, it is International Women’s Day. I salute, with gratitude to God, all the women with whom I work, our women caregivers who bear so much of the burden at home, and our women patients who bear their suffering with such dignity. May God bless them all.

A Page from Sr. Carla’s Diary: “It would break your heart.”

“Even a kind word and a showing of interest and understanding can do more than all the medicine in the world.”

Mother Mary Martin
MMMs in the 21st century continue to be open to new ministries to reach people on the margins of society, where human needs are greatest.

MMM Sisters are involved in broader issues related to health. Some are campaigning for justice. Others raise awareness about trafficking in human persons, which usually affects women and children. Still others are involved in literacy programmes and educate communities about human rights.

Our ministry as MMMs has meant offering health services in relief situations. These include responding to natural disasters, famine, violence and civil unrest. We have missioned MMM volunteers to countries such as Kenya, Ethiopia, Haiti, Tchad, and Rwanda. Indeed, this was sometimes the first step in establishing a more permanent presence in these countries – not that ‘permanent’ is an operative word for the Medical Missionaries of Mary! Providing services sometimes means consolidation, sometimes moving out and moving on. We are now preparing for a new ministry in the world’s newest country, the Republic of South Sudan.

As we move into the 21st century, we do not know what the future holds but we see many signs of new life. This year eight MMMs are taking part in the School of the Lord’s Service in Nigeria. Guided by MMM facilitators, these women have the opportunity to withdraw from active ministry for a few weeks and to reflect on their MMM call to serve where “the need for true human development is great, and the people are awaiting the liberating and healing power of the Gospel”.

Having been a lay missionary herself, Marie Martin understood the importance of the laity in sharing our life and ministry. Over the years many of our missions have welcomed students, volunteers, and others. These experiences often led to long-lasting relationships of interest and support. Some of our staff and other friends wished to have a deeper commitment to the MMM spirit and way of life as Associate MMMs. [See story overleaf.]

“I see so much I should have done and now I am getting old, but God is ever young and will look after things, if I am faithful, trust Him, and above all love Him.”

Mother Mary Martin
In recent years many of our supporters have expressed an interest in having a formal commitment to MMM and sharing our spirituality at a deeper level. As described in one of our welcome manuals: “An Associate of MMM is a woman or man of faith who is joined in a special relationship of creative partnership with the Medical Missionaries of Mary, in ministering to all people according to the mission and charism of MMM. At the heart of the Associate Movement is a call to live out the healing charism of MMM, both in prayer and action.”

Hedwig Nakafu and Agnes Manna were our first Kenyan AMMMs. In January, Thomas Nyamir and Andrew Otsieno also made their AMMM covenants in Nairobi, Kenya. Andrew is Hedwig’s husband. Further showing our international dimension, Agnes Manna is currently working in Pakistan.

Hedwig tells us what being an MMM Associate means to Andrew and her in their daily lives.

“AMMM has given us a chance to make new friends who are on a similar wavelength, with whom to share our lives’ journey. In sharing our experiences we discover ways to balance the Mind, Body, and Spirit. Like the group of disciples that Jesus gathered in his lifestyle, AMMM will help us establish a spiritual lifestyle. As a group we shall remind each other of Christ’s teachings, meditate together and create an atmosphere of peace.

“Already, our MMM mentors have played a part in pointing us to the way, being there to listen and guide us. We have had the chance to learn about the Benedictine spirituality. We have shared spiritual literature and the unfailing Lent and Advent reflections. This has helped to ground us on sound values as a family. We have also shared in the good and difficult moments, most of all praying with each other.”

There are now ninety-five AMMMs in twelve countries around the world.
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. Non-specified donations are allocated by us to the most urgent current needs overseas, or may be added to our General Mission Fund, which pays for airfares, professional training of Sisters, and the numerous emergency needs overseas for which assistance is required.

How you can work with us

- Pray with us. We remember you each day.
- Make a donation by mail or online at www.mmmworldwide.org
- Remember us in your will: Please include: “the Congregational Leader, for the time being, of the Medical Missionaries of Mary”.
- Join us as members of MMM.
- Share our charism as MMM Associates.

Our Addresses:

Please mail your donation to:

MMM Communications, Rosemount Terrace, Booterstown, Co. Dublin, Ireland. Tel: +353 1 2887180
OR Mission Development Office, 4425 W. 63rd St., Ste 100 Chicago, IL 60629-5530. Tel: 773-735-3712
OR Direct to our Bank Account:

Medical Missionaries of Mary, Bank of Ireland, Merrion Road, Dublin 4, Sort Code: 90-12-12. Account Number: 62835417
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In USA, we are a Tax Exempt 501 (c) (3) Non-Profit Organization.

Come visit us at: www.mmmworldwide.org

Thank You!
If you have donated to MMM recently, please ignore the enclosed Appeal.

Called to be with God Forever

Sister Mary Dunne
Died 23 November 2011

Sister Mary Canty
Died 12 December 2011

Sister Cora Wall
Died 18 February 2012

Sister Mary Swaby
Died 20 February 2012

Sister Eithne Walsh
Died 23 February 2012

Sister Gabriel Duffy
Died 29 February 2012

May they rest in peace.

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