

AWARENESS

www.survive-miva.org Getting others back on the road to self-help

Missionary Vehicle Association - UK Registered Charity No. 268745



FREE The twice-yearly magazine of SURVIVE-MIVA - JULY - DECEMBER 2021 - ISSUE 70

PLENTY OF SUPPORT AND CARE ON OFFER

The Franciscan Sisters of St. Bernadette of Lourdes, Mwanza, Tanzania

Mwanza is to be found in the north of the country, on the central southern shores of Lake Victoria, and is the base for much of the work of the Franciscan Sisters of St Bernadette of Lourdes. This indigenous (i.e. founded in Tanzania) Congregation is of Diocesan right, and as such is under the authority of the Archbishop, whereas those of Pontifical right are under the authority of the Pope.

According to Sr Paschalia Nyeura FSSB, "In this part of the world, the Church lacks income-generating activities and can barely support itself financially." In spite of this, Sister is keen to point out that the Church can still offer plenty of pastoral support and care for its people, and tells us: "As a Franciscan Sister, I work as a catechist and counsellor in and around Malimbe Convent. Where I work, I take care of 12 different outstations, and have to ensure regular and clear communication among them. These outstations are in effect small church communities, and form part of my wider catchment area."

The roads that lead from one community to another are little more than earthen tracks, and as such are subject to the vagaries of the rains, and have little regular maintenance, all of which makes for infrequent and difficult communication at the best of times - especially when limited to travelling on foot. It was for this reason that Sr Paschalia contacted us to ask for help.

"A simple but reliable means of transport is necessary to enable me to reach out and provide not only spiritual services, but also material and physical support to the people who are struggling with poverty, ignorance, and preventable diseases like HIV/AIDS & malaria. My aim is also to improve the ability of local communities to manage and

implement awareness on the prevention of malnutrition, malaria, diarrhoea, and AIDS, the diseases that are very common and have severely affected this area. A motorcycle would help me to travel to different parts of the pastoral area to gather and analyse information on the spread and levels of disease, as well as conduct village meetings on prevention and containment of harmful viruses"

SURVIVE-MIVA responded to Sister's call, and a £3,300 grant provided a sturdy off-road motorbike which has done much to consolidate her work on a daily basis. She asked us to pass on this message to you all: "So much of the hardship I had faced simply to make my visits to the communities more regular has now been lifted.

My abundant thanks go to all those who contributed to this project. I have nothing to offer you in return but my prayers, always."



OVER
47
YEARS'
SERVICE

Read on to see how your support is providing practical, everyday mobility to our beneficiaries overseas, and how your contributions bring hope to so many...

Who's who at...

SURVIVE-MIVA

Ian Crabtree

Speaker, Hampshire



"My involvement with SURVIVE-MIVA resulted from a direct invitation from a very forthright previous speaker and former parishioner at my parish, Bernard Black RIP. Bernard used to boost my ego no end through compliments about my proclaiming of the Word at Mass and when it came to him standing down as a Survive speaker, rather pointedly told me

he could think of no better relief to carry on the good work.

How could I possibly refuse! The rest as they say is history, but I have absolutely no regrets in accepting the mantle and indeed am most grateful to Bernard for persuading me to undertake God's work in this way. I have met so many welcoming and generous people on my parish visits and am often surprised at the number who already subscribe to Awareness.

As a small charity we have a unique mandate, and this often inspires people's generosity. May the Spirit continue to guide us all in our endeavours!"

Patron:
Most Rev Malcolm
McMahon OP, Archbishop
of Liverpool

Appeals Organiser:
Sue Valentine

Finance Officer:
Margaret Jackson

Director:
Simon Foran

SURVIVE-MIVA is a Catholic Lay Association and a Registered Charity (No.268745) founded in Liverpool in 1974.

We exist to provide funding for essential transport for health outreach work in isolated rural areas, and for the Church's pastoral care in places of difficult access.

We have some 50 lay Speakers based across Britain who make appeals for funds in Catholic parishes via short lectern talks about those we do our best to help in a very practical way.

We are grateful to the Bishops of England, Wales, and Scotland for their support in our endeavours as the only UK-based charity to fund exclusively for transport.

For more information on our work, contact us at

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Visit us at: www.survive-miva.org

A ROADMAP FOR THE RETURN JOURNEY

Welcome once more, readers, to the latest edition of our magazine, number 70 in fact - our 'platinum special', I suppose you might call it. It is the third edition we have produced since the pandemic overtook us, causing so much fear and disruption, and great sadness and tragedy to so many. Against such a background, it is hardly a landmark issue we can celebrate in any real way - indeed, when celebrations and commemorations have had to be deferred given the enormity of events, any comment in these pages from me seems superfluous at the very least. What I *will* allow myself, however, is some space and time to bring you an update, both of our work here over the past months, and that of those overseas we do our best to support, 'in good times and in bad'. The road, as always, must go on.

How then, have we been coping since issue 69, and, as restrictions here are lifted, how will we find our way back? What direction should we take?

In common with everyone else, the crisis caused us to pause and engage in a period of reflection and readjustment to the circumstances, both in our fundraising and in our grant making. We have taken what we think is a prudent approach to both in these uncertain times. By this I mean that we have not rushed in where angels fear to tread and made grants and bank transfers overseas without considered thought, especially given that our traditional ability to replace funds - via parish appeals and second collections at Mass - has been brought to a prolonged halt.

Nevertheless, thanks to your generosity, we *have* been able to continue our financial support, although we have had to adapt to ensure our effectiveness in changed circumstances and reduced capacity, as is to be expected. Some time ago now, I gave a lot of thought to our Association's place as a funding agency amidst the uncertainties, and soon became conscious of the fact that I needed to find some stability in the chaos, and a new or modified direction for our activities, in the light of what was happening all around. What exactly was in our hands to amend or revise though? How would (or even *could*) we adapt?

At one time, you will remember that we had all been instructed to stay firmly put, working from home wherever possible, not mixing households or meeting up outside a bubble with one other person, (who had to live alone to qualify), except in limited numbers, at a distance, and in the open air, *avoiding all but the most essential travel*, and even then moving about *only very locally*, within a complex set of 'enforcement parameters' shall we say, that not even the police could always follow.



All images in this edition provided by those you have made mobile.



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In other words, we were ‘encouraged’ to live under rules whose sole aim was to promote behaviour which - aye, there’s the rub - constitutes *the precise opposite of what our vehicle grants are designed to bring about*. I quickly realised that we needed to look much, much more closely at this apparent and sudden conflict, and at the possible consequences for what we (or those we support) aim to bring about.

In essence, at the heart of what we value lies a mixture of community togetherness, (‘comm-union’), a willingness to share in each other’s problems and suffering, (com-passion), the recognition of the need to increase basic, everyday human contact (com-pany) - and the determination not to permit the neglect and isolation of the infirm and the vulnerable, whether young or old. This is the ‘*sine qua non*’ of our single charitable purpose - that others should have the means at hand to travel unhindered and regularly from place to place - with all the aforementioned as the *primary reason for their daily journeys*.

Logically, my thoughts then turned to the information gap we faced from overseas, at least from those places for which we had grants pending, but had as yet no idea of what restrictions people there faced. How were *they* coping? We needed to bridge the gap, lest we, by the nature of our international grant making, should ourselves (though unwittingly and indirectly) be contravening the requirements placed on *others* - simply by making them mobile.

As a small (but highly cost-effective) charity, we have no staff or offices overseas as other much larger organisations do, no ‘country desk officers’ to act as our foreign correspondents, and no direct lines of communication to ministries or local government officials. Neither are we a disaster agency designed to react quickly in times of emergency - a highly specialist role requiring huge resources and infrastructure far, far beyond our means.

Instead, what we *do* have is the worldwide network of the Universal Church and its representatives; local Parish Priests, Diocesan transport committees, regional Catholic radio stations, Vicars for Finance, Bishops and Archbishops, and above all - with their noses always very firmly to the ground - local Religious who are intimately familiar with the challenges their communities face, day in, day out. These are valuable contacts who, although they may not have all the answers or exact figures to hand (who does?), will certainly know the extent of the challenges and the impact, large or scarcely yet registered, the virus is having locally - and *local* is what we are all about.

The pandemic has meant that we now have added responsibilities towards all concerned, both givers and receivers, and so we ask for confirmation of some other basics before we proceed. We need to know if travel is possible for our applicants, and the extent to which the virus has reached them. What testing is being carried out? Is social distancing practised generally or only in a church setting (it is usually the latter). We also queried whether our beneficiaries themselves could potentially be spreading the virus. In a climate of ‘vaccine nationalism’ there seems little point in enquiring about the numbers of jabs they see being given...

I am pleased to say, however - at least from the replies that have come in - that to a great extent my earlier fears have been eased. Paradoxically, it seems that the very isolation

surrounding our rural ‘target’ groups has led to a certain amount of protection as a consequence. Being well away from the beaten track has almost been an advantage - a barrier not afforded those in the larger conurbations - and village health workers and pastoral agents are seen as being ‘regulars’ as opposed to unknown outsiders coming in when neither wanted nor seen as needed. Being hard to reach isn’t always a drawback, despite the many hardships of everyday life such as lack of clean water, and all the other factors that the virus has merely added to, where it has been able to penetrate communities. Whilst we all know that no-one is safe until we all are, this does not mean our work at the grass roots overseas is at a standstill, by any means. *We still have our important and unique role to play, as has always been the case.*

Turning to the home front in the Covid battle, a standstill, sadly, is what we face as far as parish fundraising is concerned, as you all know, and the roadmap for a return to regular worship and attendances will be a long and winding one.

Our appeals in parishes up and down the land are agreed sometimes months in advance, and our annual cycle for arranging these, where and when parish priests are able to accommodate us, runs from September to May. No such parish appeals have been possible since March of 2020, and so our hopes are placed in the continued success of the vaccine campaign, so that we can take up our cycle once more in September of this year, with a view to booking appeals from then on and into 2022. As you will appreciate, your support for those you read of in these pages will continue to be as vital as ever, as we take the first steps on the return road to recovery.

As I sign off this platinum edition then, I feel positive about the coming months and year, and am looking forward to the return to collective worship at last, and the sense of togetherness that unites us all - here and overseas - as we move towards another landmark on the onward journey - our Association’s golden jubilee year, in 2024...

Thank you so much for your unfailing support, along our highways and byways, and through thick and thin.

God bless,

Simon Patrick Foran,
Director.





NEWS FROM OVERSEAS

Each issue we do our best to keep you up-to-date with the progress being made by those you have supported. There are no easy or quick solutions to the problems our beneficiaries face each day, but we know that being mobile does enable them to tackle jobs they would otherwise have great difficulties doing. Here is an update on just some of the work being carried out:

INDIA

Fatima Health Centre, Diocese of Kottar, Tamil Nadu

Lying directly south of Andhra Pradesh ['land of the Andhras'], and covering most of the south-eastern cone of the country, the 'Homeland of the Tamils' (tamil meaning 'sweet nectar', for the etymologists among you) is, after 'A.P.', the second Indian State whence most of our requests originate.

The Congregation of the Sisters of Our Lady of Fatima is a Missionary Congregation with over 430 Sisters in all, having 82 communities working in 34 Dioceses of India, mostly in rural areas.

Sister Nirmala Thomas, our contact in Kottar, got in touch to tell us: "We established our mission center in Ramapuram, a remote village in Kanyakumari district in the year 1995. Seeing the deteriorating health conditions of the people in this locality, we started Fatima Health Centre in the year 1996 because of the constant requests for support we were getting from the local people.

Like Jesus who loved the sick and healed them, we have the mission to assist the sick and alleviate their suffering. We hold in high esteem those who share in this ministry of comfort and healing. People make use of the Centre for treating their sickness. We also started expanding our health apostolate for the rural masses in 18 villages, but we require a vehicle to continue our healing ministry effectively in these more remote areas. We therefore request you whether you could extend your financial support to purchase a vehicle for our healing ministry."

Our own mission to help where we can, by using donated funds in places they will have a practical impact, is once more illustrated by the response we received, which has so much in common with so many others, and shows how our supporters can change things for the better - and quickly - once a form of transport is in service:

"We the Sisters at Fatima Health Clinic are very grateful to SURVIVE-MIVA for releasing £11,700 to procure a vehicle for our Clinic.

We are elated to inform you that we purchased the vehicle with your grant. Earlier our health ministry was severely hampered due to the lack of a vehicle. Now we are happy that we have our own vehicle for our healing ministry. We regularly visit the villages and organise health clinics. People are very happy with our services. We organise health awareness programmes in all the villages. Special awareness programmes on various viral fevers are organised regularly.

We motivate the people to keep their surroundings neat and clean. People are very cooperative and follow the instructions given to them. We send the vehicle to pick up pregnant women to the health centre for the delivery on time. The elderly and vulnerable are also picked up and are brought to the health centre for treatment. We are finally able to return safely to our base, and also arrive on time from the far off villages after our healing ministry. We thank all the well-wishers of SURVIVE-MIVA for your support and request you to continue your support to the missionaries who are in need like us."



Getting others back on the road to self-help



UGANDA

Losilang Health Centre, Diocese of Kotido

Built in 1986, Losilang is one of five health centres which are run by the diocesan administration office, and consists of seven small consulting rooms serving a population of some ten thousand. Sr Theopista Nanozzi, who is in charge of the Centre, says: *“Our region is characterised by poor and irregular rains which hinders subsistence farming, causing food shortages nearly every year, and there is a high level of illiteracy amongst the locals, which makes the high prevalence of avoidable diseases, malnutrition, and malaras hard to combat.”*

Nevertheless, the daily work of providing primary healthcare goes on, and the Centre has an outpatient department, and provides services such as ante- and post-natal care, immunisation jabs, TB screening, and HIV testing and counselling, as well as the provision of antiretroviral therapy for those who are HIV+.

“Although we engage in outreach work, this is only on a very local basis, as we lack transport facilities, and it is often left to the sick and ill to make their own way to us for treatment, if they are able. It is a situation we are anxious to change, and this could happen if we were more mobile. We have no means of dealing with medical emergencies or complications, and the government has said we will be upgraded, which will attract even more patients. In the year 2018-2019 [the last for which figures are available] we had over five thousand outpatient visits and two hundred and seventy babies were born here. The nearest hospital able to deal with emergencies is in Kanawat, 120km [75miles] away from us.”



Bishop Giuseppe Filippi of Kotido recommended Sr Theopista's request for a grant to acquire a suitable vehicle, and told us *“The Centre has few resources of its own, and sometimes struggles to provide what it does, so I would be very grateful for any support SURVIVE-MIVA can offer.”*

As you can see from the sales receipt, the purchase of the four-by-four our grant made possible, from the aptly named 'anointed' dealers (?), happened just two days after we here in the UK went into our first lockdown, when so much was uncertain. As Bishop Giuseppe wrote at the time, things were little different at Losilang:

“The emergency caused by covid 19 came suddenly about and we though it wise to move and get the vehicle before restrictions were imposed. Thanks to the understanding of SURVIVE-MIVA we could move quickly and buy the car in Kampala, but we were not able to take it to Kotido until some weeks after. What worked in our favour was that the dealer was in hurry to sell the car, not knowing what the future was holding, and so he offered us a small discount of UGX 500,000.” [approx £100]

I thank SURVIVE-MIVA for the great helped granted to Losilang Health Centre II and to the Diocese of Kotido.

Yours sincerely

Giuseppe Filippi
Giuseppe Filippi





INDIA

Bon Secours Centre, Sirumalai. Diocese of Dindigul, Tamil Nadu

The Franciscan Sisters of Our Lady of Bon Secours started their mission in Sirumalai, a densely forest region of Tamil Nadu, in 2002. Sr Innasimuthu FBS tells us more:

“The entire area known as the Sirumalai Hills has neither a private nor a government hospital, and people here have neither health care nor transport facilities. What scant government medical facilities there are do not reach the tribal places. Dindigul Government Hospital, the nearest hospital, is 30 km away from Sirumalai. Those worst affected by the lack of access to health services are pregnant women. In view of the circumstances, there is a makeshift system in place that only a few women can afford, which involves them hiring a house in Dindigul itself, maybe for one month or so before delivery time. They stay there till delivery, because they know that in the town they will be assured of reaching the hospital quickly. In the Hills, most pregnant women rely on local women who have received no formal training in midwifery at all, which is far from ideal in terms of their chances of giving birth safely.

Our mission centre is 10 km away from Dindigul. Seeing the pathetic condition of people in these villages, the Sisters started organising medical outreach camps for the people especially for women. They also started organising general health awareness campaigns. Our Sisters visit the children of the Tribals in the hills at Sirumalai Pudur and Thenmalai. We give them awareness on education. We encourage and support the people to send their children to school. We have arranged Evening Study Centres in two places. We are unable to visit these villages regularly as we do not have a vehicle, but some form of transport is essential for us to continue our health and other social ministries in this hilly region.”

SURVIVE-MIVA was able to help consolidate and widen the Sisters’ existing work via the provision of a grant for £13,500; the rest, they took care of themselves:

“After having received SURVIVE-MIVA’s grant from the Generalate, we contacted the vehicle dealer to procure the vehicle. We fixed necessary extra fittings to the vehicle, which was then registered and insured. We appointed an experienced driver, and now make full use of the vehicle daily for health and social ministry.



We are now able to visit the tribal villages on a regular basis. Our ministry is very beneficial to the pregnant women and the whole community. We create awareness on communicable and non-communicable diseases amongst the tribal people and train them on preventive measures. We also visit our tuition centres regularly and see that every child is given equal importance and can improve their academic performance. All these activities are possible now because of the vehicle. We are very thankful to SURVIVE-MIVA for its timely financial assistance which has done so much to help us continue our ministry effectively.”



Getting others back on the road to self-help

