

MaterCare International

"maternal health is a human right"

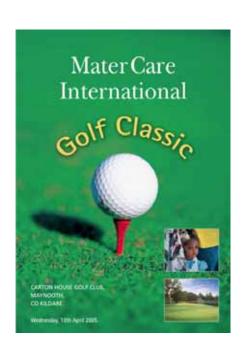
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MaterCare Ireland's Inaugural Golf Classic





Carton House will be the venue of the Nissan Irish Open 2005 when over 60000 people will watch some of the world's best golfers. This is a milestone in the history of this great estate.

For MaterCare Ireland, our inaugural Gold Classic at the O'Meara course on April 13th is also a significant event. The proceeds from this event will contribute to MaterCare International's healthcare initiative in Africa that will ease the suffering of hundreds of women each year who suffer from what the World Heath Organization (WHO) has called "the forgotten disease".

Our 40-bed Birth Trauma Centre at Cape Province in Ghana, due for completion in July 2005, will be used to treat women who suffer from a preventable condition called obstetric fistulae. It is estimated that some two million women in sub-Saharan Africa

suffer from obstetric fistulae with an estimated 80,000 new cases each year.

Fistulae survivors are rejected by their families and communities and often end up living isolated lives. Yet with adequate medical and nursing care, mortality and morbidity can be prevented. Care that our mothers, sisters, wives, or daughters receive in developed countries.

The centre, which will cost over €150,000 to operate each year, has an operating theatre, outpatient department and residence for trained local doctors and nurses. Its supported by both the Bishops Conference and the Ministry of Health in Ghana. Some 200 women will be treated at our clinic in 2005 and this number will increase to 500 from 2006 onwards. The cost of caring for each women is €155.

Prof. Eamon O'Dwyer (eodwyer@indigo.ie)

Report of MCI's 3rd International Workshop held in Rome, October 2004 Issues in Obstetrics and Gynaecology and Distance Learning

MaterCare International (MCI) held its 3rd workshop for Catholic obstetricians Oct 13-17, 2004, in Rome, reportedly "the best yet". Ninety-five registered from over 20 countries - including specialists, general practitioners and others from other disciplines of midwifery, law, moral theology, bioethics, politics, as well as representative of support and pro-life organizations. Registrants ate and resided in the magnificent centre with a sensational view overlooking St Peter's Square; new friendships and discussions of common interests continued into the late evening.

In June 2001, MCI and the World Federation of Catholic Medical Associations initiated the workshops with 140 Catholic obstetricians

from 40 countries to discuss the Human Right to be trained and to Practice according



to Conscience, a theme continued at the 2nd workshop held in October, 2002 which discussed the State of Health of Mothers around the World and the Role of MCI in the

Health Ministry of the Church.

The 2004 workshop opened with a wine & cheese party and a documentary on the life of MCI's patron saint, St. Gianna Beretta Molla, as well as a keynote address by Dana Scallon, leading international prolife advocate and singer, and until recently a member of the European Parliament. Each day began with Mass celebrated by members of the Vatican curial office. At the final Mass, a letter of thanks from the daughter of Dr. Gianna Emanuela Molla for the honour given to her mother was read.

Speakers from the United States provided the scientific, epidemiological and sociological evidence on links between abortion and other conditions. There were discussions on the

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on the biology and bioethical concerns of stem cell research as well as presentations on HIV/AIDS, Youth in South Africa and What Every doctor should know About Conscience and the problem of infertility and ethical solutions. Papers on the politics of pro-life action and issues affecting family, marriage and euthanasia were presented. Professionals and non-professionals discussed MCI and its

role as a champion of motherhood and a provider of new initiatives of service, training, research and advocacy based on life and hope. A first step was made in the path of developing an on-line bioethics course for busy clinicians.

In all: a huge success. The next workshop will be held in 2006.

MaterCare Croatia, MaterCare Poland and MaterCare Hungary? Dr. Walley visits Central Europe

At the invitation of Marijo Zivcovic, long time Director of the Zagreb Family Life Centre; Dr. Robert Walley visited Eastern Europe in January 2005. Father Valetin Pozaic, S.J. Professor of Bioethics at the Jesuit School of Philosophy and attendee of all three MCI Rome workshops hosted them in Zagreb, Croatia.

During this visit, Dr. Walley lectured at universities and other centres on maternal and human life issues, issues of conscience, the problems facing the Church and the work of MaterCare. He was also called upon to explain the MaterCare's concept to Catholic ob/gyns, general practitioners, pro-life groups, bio ethicists and clergy. There is much enthusiasm for establishing MCIs locally. While in eastern Europe, Dr. Walley granted numerous interviews for Catholic radio and television.

Dr. Walley met with Dr. Imre Teglasy,

General Secretary of the Hungarian Pro-life Movement, known for his alternative services for unmarried mothers, and broadcasts on television and radio on bioethical issues. In Krakow, Dr. Antoni Marcinek and his daughter were on hand as well as Dr. Marija Zagar, the Head of Polish Catholic ob/gyns. After being dismissed from the Krakow hospital for his pro-life views ten years ago, Dr. Marcinek established a private pro-life hospital, which has developed into an excellent maternal and child hospital, providing full obstetrical and neo-natal services, now recognized by the university and government and receiving full funding.

While in Warsaw, Dr. Walley had the opportunity to see many of the historic sights including the Black Madonna of Czestochawa and German Concentration Camps at Auschwitz. He felt honoured to visit the Pope's hometown of Wadowice, the Pope's home and the

Church where he was baptized. Dr. Bogdan Chazan, a senior ob/gyn dismissed from the university hospital for refusing to terminate a Down's Syndrome baby, hosted them. Now Director of the Holy Family Hospital in Warsaw, he re organised the hospital for mothers and babies.

Hungary's pro-life movement, Dr. Walley discovered, is not as strong and receives less support from the population. Croatia, in contrast, is very Catholic with strong bishops but is still suffering from the communist years and from the recent civil war and the break-up of Yugoslavia, thus the maternal health issues are difficult.

Dr. Walley felt that like-minded men and women of Croatia, Hungary and Poland favoured the establishment of MCI locally and trumpeted the idea of a MCI workshop for ob/gyns in post-communist countries, perhaps in 2007.

Next MCI Project- Rwanda and Kenya



Rwanda

Kenya

Dr. Walley will be traveling to Rwanda in March 2005 to develop with Dr. Charles Ntare, the Archbishop of Kigali- Msgr. Thadeo Ntihinyurwa, the government and the University of Rwanda, MCI's second Birth Trauma Centre. The Centre will be based on the same concept being developed in Ghana.

Rwanda has suffered greatly from the genocide ten years ago and is one of the poorest countries in Africa. It has one of the

highest maternal and infant mortality rates in the world.

En route Dr. Walley will also visit, at the invitation of Bishop Locati of Isiolo Diocese, Northern Kenya, to access the maternal health situation among the nomadic people in his diocese with the idea of developing MCI's essential rural obstetric rural program introduced into the diocese of Sunyani, Ghana.



MCI's New Website! Set to Launch April 2005 New section for medical professionals! www.matercare.org

Birth Trauma Centre Update- February 2005

The Birth Trauma Centre construction key features for this February month is seeing that all the structure works and those for the roof sheeting at both the Operating Theater and at the Patients Ward Sectors have been completed and MCI can be expected to see that the Reception Out Patient Department roof will also be completed well before the Easter Holiday.

The field engineer, Mr. Wilberforce expects also that the finishing terrazzo works for both the Operating Theater and at the Patients Ward Sectors to be completed by the end of March 2005.

In all, the project schedule works carried throughout the Operating Theater, the Patients Ward and Reception Out Patient Department Sectors should bring them fully completed by the end of July 2005.

Denis Lafleur- MCI Field Officer, Ghana









Legalizing Abortion More Likely to Increase Rather than Decrease Maternal Mortality, Particularly in the Developing World (LifeSiteNews)

NEW YORK. 10. December (LifeSiteNews.com) - The population control arm of the United Nations, UNFPA, and its abortion-pushing allies, most notably International Planned Parenthood, relentlessly press for legalizing abortion with the claim that it is needed to reduce maternal mortality by reducing "unsafe" abortions, particularly in the Developing World.

However, Jeanne Head, R.N., the chief pro-life lobbyist at the United Nations, and herself a former labor and delivery nurse says the reality is quite different from the UNFPA claims. She told LifeSiteNews.com that statistics from the United Nations World Health Organization itself demonstrate that maternal mortality decreases with the overall improvement of national health care and the general health status of women rather than with legalization of abortion. Moreover, UN figures demonstrate that the legalization of abortion can lead to an increase in maternal mortality.

"The legalization of abortion does nothing to solve the underlying problem of poor health care in the developing world," "Women generally at risk because they lack access to a doctor, hospital, or antibiotics before legalization will face those same circumstances after legalization. And if legalization

triggers a higher demand for abortion as it has in most countries (as Stanley Henshaw of Planned Parenthood's research arm, the Guttamacher Institute, admits it does), more injured women will compete for those scarce resources." Head told LifeSiteNews.com.

She explained that even in the United States, with some of the best medical care in the world, official figures indicate that over 300 women have died from legal abortions since the procedure was legalized nationwide in 1973.

Head, the UN representative for the National Right to Life Committee, and International Right To Life Federation, points out that the combination of poor medical conditions in the developing world and the increase in abortions which inevitably result from the legalization of abortion, are a deadly combination for mothers. The UN Population Division publication, 'World Population Monitoring 2002', notes several countries in which abortions rose rapidly after the law's liberalization.

In a research paper published in the magazine "The World and I" in June, Head compared UN statistics on Britain, where abortion has been broadly legal for decades, and the nearby Republic of Ireland, which has long banned the practice. "According to the 1990 UN Demographic Handbook, Ireland's maternal morality rate for 1988 was some three and a half times lower than Britain's," wrote Head.

In her paper, Head also points out that the UN Population Division report 'Abortion Policies: A Global Review' reports that in India, where abortion is broadly allowed, the procedure is still practiced under dangerous conditions and the maternal mortality rate remains high. However, the same report notes that in Paraguay maternal mortality rates have been declining, even though abortion is generally prohibited and "clandestine abortion is common."

Head who co-authored the paper with PhD student Laura Hussey, concludes, "Despite these facts, arguments about high levels of 'unsafe' abortions and the need to legalize abortion to decrease maternal mortality still dominate the international abortion debate. Yet the facts suggest that maternal morality can be reduced in the developing world the same way it has been done in the developed world since 1935 (long before any legalization of abortion) - by improving basic and maternal health care and the general health status of women, not by legalizing abortion."

(Source: LifeSiteNews.com-December10, 2004)

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MaterCare International

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MaterCare Speakers' Bureau Training Session

"You can't get behind something if you don't know anything about it!" Unfortunately, the appalling conditions suffered by birthing mothers in developing nations is almost unknown to most North Americans as are MaterCare's efforts to alleviate their situation.

So often, after a MaterCare presentation, one or two of the audience will ask "what can I do?" For several years, the MaterCare Volunteer Coordinator has been collecting names of people across Canada who would be willing to do presentations on the work of MaterCare. But every organization must ensure the highest possible quality in the face it presents to the world and thus the idea of a training session for our Speakers' Bureau volunteers was born.

In April, an intensive one-day training session will take place for selected volunteers who have agreed to speak on the work of MaterCare. Fifteen volunteers will spend the full day learning from Dr. Robert Walley about everything related to MaterCare, with ample opportunity for interaction, no holds barred. They will learn about the trials, tribulations and triumphs of working in developing nations that Dr. Walley and Professor Kay Matthews have learned first hand over many years. MaterCare

International, MaterCare (Canada), its establishment, its philosophy, its successes, its frustrations, its failures and anything else the volunteers want to talk about will be on the table.

As part of the invitation to the training session, volunteers were required to commit to doing presentations when asked in their local area as well as to create opportunities to do presentations by contacting local groups such as Catholic Women's League and Knights of Columbus councils, parishes, Kinsmen and Kinette groups, Christian women's groups – in short, any group of people who might be interested. In addition, all presentations must be in keeping with MaterCare's stated philosophy and aims.

The session will be hosted by members of the Catholic Women's League, Our Lady of Peace Council, at 8 Wing Trenton in Ontario Canada. Many of the volunteers are current and retired military women or military wives, a group that seems to naturally have an understanding of some of the conditions elsewhere and the motivation to do what they can to help.

For more information contact: Theresa Winchester: tjw_ca@yahoo.ca

UN: "Pregnant Women Among the Worst Affected Survivors of the Tsunami"

Reports out of the United Nations that expectant mothers and young girls are among the hardest hit tsunami survivors. The reports state that a 'second wave' could be worst than the first wave that killed over 200,000 people. Million of people are without safe drinking water and are susceptible to disease. Entire health infrastructures have been wiped out. The Indonesian Midwives' Association

reported that they had lost 30% of their 5,500 members. UNFPA states that even in ideal conditions, 15 percent of pregnant women will require emergency obstetrical care. Without access to medical supplies and obstetrical care, which is a human right, maternal and child mortality rates will increase significantly. (Source: UN Press release-28/12/2004; 19/01/2005

MaterCare International (MCI) is an international organization of health professionals dedicated to the care of mothers and babies, both born and unborn, through new initiatives of service, training, research, which are designed to reduce the tragically high rates of maternal mortality, morbidity, and abortion.

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Our mission is to serve the Culture of Life where it is most at risk- those crisis areas and 'hotspots' where mothers and their children -born and unborn- are neglected or abandoned outright.

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MaterCare International

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