



Emerald Russell Helps Restore Health and Hope to Children in Uganda

Jennifer Boyer, MPH

As night wore on in a Ugandan hospital, Adolf, a 10-year-old boy with advanced AIDS, became worse. Emerald Russell, a CMMB volunteer, was there by his side, but there was only so much she could do.

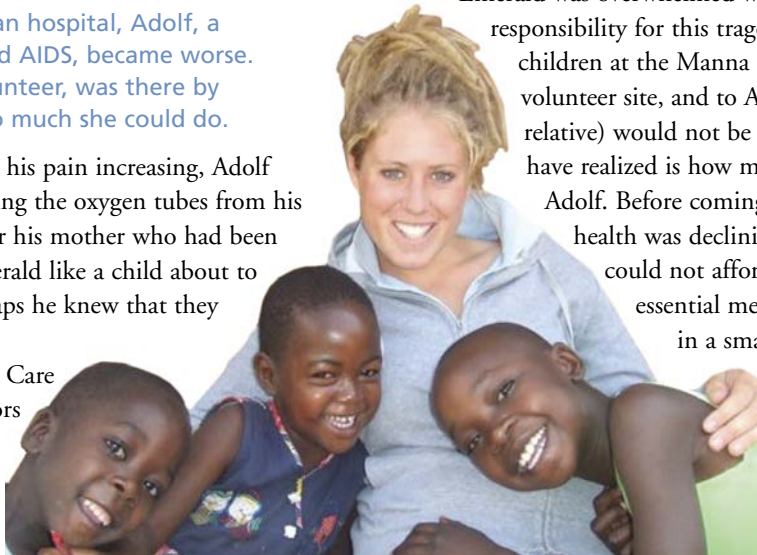
With his temperature rising and his pain increasing, Adolf was slipping into delirium, ripping the oxygen tubes from his nose and crying out in agony for his mother who had been dead for years. He clung to Emerald like a child about to be taken from his mother; perhaps he knew that they would soon be separated.

After being in the Intensive Care Unit for only an hour, the doctors came out to tell Emerald that Adolf had passed away, joining the rest of his family in the life

hereafter. The tests done on Adolf showed that his condition had existed long before Emerald had met him. His extremely enlarged liver had been fighting his heart and lungs and his frail system could no longer support all three.

Emerald was overwhelmed with grief and a feeling of responsibility for this tragedy. Going home to the other children at the Manna Rescue Home (MRH), her volunteer site, and to Adolf's grandfather (his only living relative) would not be easy. What Emerald may not have realized is how much of a blessing she was to Adolf. Before coming to MRH, Adolf had little. His health was declining drastically, his grandfather could not afford to feed him (let alone provide essential medical care), and he spent his days in a small shack without even a comfortable bed. In the few months that Adolf was at MRH, his health had generally improved, but most importantly, he was

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CMMB Getting Men Involved in Maternal Health

Preventing the transmission of HIV and AIDS from mother to child has become a large part of the work of CMMB.

With USAID (U.S. Agency for International Development) funding, CMMB has been able to expand our Men Taking Action (MTA) program to our South Africa office. CMMB acknowledges that, in the fight against HIV and AIDS, it is important for us to acknowledge the role heads-of-households and community leaders play in the prevention of transmission of HIV and AIDS.

PMTCT (Prevention of Mother-to-Child Transmission) of

HIV and AIDS is a key factor in taking care of those individuals in the developing world who cannot take care of themselves, children, and infants. In locations where clean water is hard to come by and every day is a constant struggle, community and familial support become important factors for women who need to remain on their antiretroviral therapy (ART).

One of the prongs of PMTCT, prevention of transmission from HIV-positive women to their infants, emphasizes how important it is for women to maintain their ART before, during, and after childbirth. It also emphasizes the importance of knowing your status in the community. Yet, the negative stigma attached to HIV status affects the likelihood of people seeking out the proper treatment for them and their partners.

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**This truly fulfills CMMB's motto of
'saving the world one person at a time'**

Healing Help Statistics FY 2008

In FY2008, CMMB set a new record for donations of pharmaceuticals and medical. We received product valued at U\$19 million and made **556 shipments** of medicines and supplies to **40 countries** in **5 regions**.

These products were valued at **US\$186,957,654**.

Details on the shipments:

- 16 shipments were sent in response to emergencies — 4 to Dominican Republic, 6 to Haiti, 1 to Mexico, 4 to Nicaragua and 1 to Peru.
- 153 shipments were sent to CMMB core countries — 86 to Haiti, 44 to Honduras, 20 to Kenya, and 3 to Zambia.
- 219 consignees received donations.
- 3 CMMB volunteers transported donations.

Africa

Benin	\$114,768
Cameroon	\$1,257,096
Congo	\$121,899
Ghana	\$524,574
Kenya	\$14,036,486
Liberia	\$424,245
Morocco	\$7,254
Nigeria	\$2,402,698
Sierra Leone	\$46,708
South Africa	\$21,176
Swaziland	\$150,903
Tanzania	\$33,373
Uganda	\$82,660
Zambia	\$2,579,080

Asia/Pacific

Micronesia	\$17,569
Philippines	\$32,113,589
Thailand	\$8,829
Vietnam	\$208,446

Eastern Europe/Europe

Armenia	\$4,720,776
Belarus	\$46,239
Romania	\$199,683
Spain	\$17,586

Latin America and the Caribbean

Belize	\$199,095
Brazil	\$128,862
Colombia	\$71,000
Dominican Republic	\$4,487,264
Ecuador	\$300,612
El Salvador	\$3,980,352
Guatemala	\$14,229,768
Haiti	13,690,731
Honduras	\$14,182,253
Jamaica	\$1,683,808
LAC	\$32,632,673
Mexico	\$867,854
Nicaragua	\$16,225,556
Panama	\$13,620,722
Paraguay	\$2,444,218
Peru	\$56,384
St. Lucia	\$44,445

Middle East

Gaza/West Bank	\$77,306
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Total value: US\$186,957,654

Volunteers Serving Around the World

From February to November the Medical Volunteer Program has sent **351 short-term** and **100 long-term** volunteers to **27 countries** around the world. The following **CMMB** volunteers departed for their overseas missions February – November 2008.

Joseph Ayers, M.D.
Kilembe Mines Hospital Kampala,
Uganda, 1 year

Margaret Byers, M.D.
Maria Madre de Los Misioneros Enase,
Peru, 6 months

Casilda Chenier, PA-C
Nuestros Pequeños Hermanos
Comayaguela, Honduras, 1 year

Thomas Chenier, MBA
Nuestros Pequeños Hermanos
Comayaguela, Honduras, 1 year

Natalie Delyon, Speech Therapist
Hospital José María Velasco Ibarra Tena,
Ecuador, 1 year

Pablo Denes, MD
Stadler-Richter Hospital Tena, Ecuador,
1 year

Martha Groot, R.N.
Nuestros Pequeños Hermanos,
Comayaguela, Honduras, 1 1/2 years

Kari Hendricks, R.N.
Mercy Clinic in Belize City, Belize, 1 year

Daniel Hottinger, Clinical Assistant
Nuestros Pequeños Hermanos Honduras,
1 year

Beth Lavallee, RN
Farm of the Child Trujillo, Honduras, 1 year

Christina Maiale, R.N.
SOLT in Cayo District, Belize, 1 year

Mark Muller, Agriculture
Pastoral of the Mujer & Pastoral of the
Inmigrante, Choluteca, Honduras, 1 year

Eve Nelson, X-Ray Technician
Stadler-Richter Hospital Tena, Ecuador,
1 year

Dr. Linda Novak, M.D.
San Benito Clinic, Peten, Guatemala, 1 year

Sara L. Ogradnick, R.N.
Fundación Ecuatoria Santa Maria del Fiat,
Ecuador, 1 year

Nicole Patterson, R.N.
SOLT in Cayo District, Belize, 1 year

Aby Philip, M.D.
Smehadeepam Hospital Kerma, India,
Open

Amy Smith, P.A.
Pastoral of the Mujer & Pastoral of the
Inmigrante, Choluteca, Honduras, 1 year

Heather Szymczak, RN
Hillside Health Clinic, Punta Gorda, Belize,
6 months

Jamelah Tangara, R.N.
Muchacho Trabajador Quito, Ecuador,
1 year

Sr. Pamela Marie Volland, Teacher
China Care, Beijing, China, Open

Remeica Wilmot, R.N.
Muchacho Trabajador Quito, Ecuador,
1 year

Dr. Arthur Ammann, Global Strategies for HIV Prevention

Congo, DR Congo, Liberia, Dominican Republic, Haiti

It is estimated that
700,000 infants lose their
lives to HIV each year.

This number is staggering, especially considering the advances made in anti-retroviral (ARV) medications that nearly eliminates the risk of pregnant HIV-positive women from passing the virus to their babies. The problem is that getting these drugs to women is particularly challenging in countries that are affected by poverty and war.

Dr. Arthur Ammann, is the president of Global Strategies for HIV Prevention, a nonprofit organization founded in 1998,

committed to reaching out to women and children infected with HIV. Global Strategies lives up to its name, taking the lead where many organizations dare not go due to unstable governments or struggling economies. Most recently, Global Strategies has focused their efforts in countries such as Congo, the Democratic Republic of the Congo, Liberia, the Dominican Republic, and Haiti. In these countries, they join with fellow healthcare organizations like CMMB to train local healthcare workers, and import medications and supplies.

Since 2000, CMMB has donated over \$715,000 in ARV medications to Global



Dr. Ammann, President of Global Strategies for HIV Prevention

Strategies. Dr. Ammann is able to transport these medications to areas where they are most needed. "Receiving a shipment is very moving. When we get boxes with thousands of doses, that's thousands of mothers and babies we are helping," says Dr. Ammann. "We are thankful. There are stories behind these individuals who benefit from the medications. The personal aspect brings the meaning of what we are doing." ●

CMMB Receives Presidential Award

President Gloria Macapagal-Arroyo of the Philippines has honored CMMB with the 'Kaanib ng Bayan' Award.

The award is given to foreign organizations that have made exceptional contributions to the Republic of the Philippines. In the past decade, CMMB has distributed over US\$89 million worth of life-saving medicines and medical supplies to Filipino communities in need.

CMMB was nominated for this award by the New York-based Home Reach Foundation. Among its many projects in The Philippines, the Foundation works diligently to provide for those in need of healthcare on the island of Bohol.

CMMB has partnered with Home Reach Foundation since 1999, donating medicines and medical supplies, with a special focus on the needs of children. This has included joint work on a pre-natal multivitamin program for pregnant women to reduce birth defects.

Representatives of the Home Reach Foundation accepted the 'Kaanib ng Bayan', on CMMB's behalf at a ceremony presided over by President Macapagal-Arroyo in December. ●

ABOUT CMMB



Founded in 1928, CMMB works collaboratively to provide quality healthcare, without discrimination, to people in need around the world. In FY2008, total support to CMMB reached over US\$200 million. It provided medicines and medical supplies to 47 countries valued at more than US\$185 million, and supported medical volunteers that provided 17,812 days of service valued at US\$5.9 million. With donor support, CMMB collaborated with partners to support healthcare projects in the developing world that address HIV and AIDS, child health and neglected diseases.

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CMMB Volunteer Emerald Russell...

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happy. His last week was spent with Emerald exploring the city, near the hospital, seeing and doing things that he had never before experienced. She played a huge role in his last moments of joy. Emerald was not there because Adolf was her family or because it was her job or duty — she was there because she loved this little boy and that love had developed through her service to him.

Emerald is a long-term CMMB volunteer at MRH, witnessing the day-to-day struggles of children living with HIV and AIDS. One of CMMB's partner organizations, Youth Encouragement Services (YES), opened the Manna Rescue Home in Fort Portal, Uganda in January of 2008, through the dedicated efforts of Carol Adams, the organization's managing director. The home provides a family environment for up to 30 children with HIV or AIDS who have no capable caregiver. When the children first arrive at MRH, they are often in desperate need of medical care and affection. Most have watched their family members die one by one of AIDS and are sadly on the same road if they do not receive necessary care.

In addition to providing the children with high-calorie diets, medications, and an on-call nurse 24 hours a day, MRH provides counseling and therapy. The children also reenter (or enter for the first time) school, with eagerness and success. With the stigmatization MRH children endured in their former communities, a positive

social environment finally allows them to feel normal and unashamed. In this safe place, many become visibly healthy and full of life again. Perhaps Adolf did not make it to the home early enough, but his grandfather gratefully acknowledges that the three months he spent at the home were a blessed extension on his life.

At the facility, Emerald performs tasks varying from helping children with their medications to setting up an MRH website and coordinating other volunteers. When she first arrived, she was the manager of MRH, but

now that role has been passed on to a local nurse, named Vicky, providing a sustainable system that will carry on long after Emerald departs. Emerald lives at the home with the children and truly feels as if they are all one family. With the help of her supportive family and friends in the United States, she has even done personal fundraising for MRH, raising over US\$1,000 — enough to sponsor one child in the home for one year.

Fort Portal, Uganda is very different from where Emerald grew up in Winterport, Maine, so there have been adjustments to make during her year of service. However, having previously volunteered in Tanzania at a school for blind and visually impaired



"Before I joined Manna Rescue Home, I used to stay with my grandmother. My both parents died leaving four of us. With exception of my sister and brother Ishmail, me and my brother Yasin are living with HIV/AIDS. Prior to being rescued by Carol Adams, I was suffering beyond mention. She helped me very very much. My ambition is to become a pilot when I graduate from school."

children, she has experience adjusting to new cultures. Fortunately, the people of Uganda have been very friendly and welcoming to her. As a culture, she explains, they value family and friends and are jovial, with a love for dance and celebration. Emerald may get strange reactions during her morning runs around the area and the constant calls of "Mzungu! Mzungu!" (*'White person!'*) from the streets never seem to let up, but the people have been accepting and gracious to her. Individuals in the community often stop Emerald to tell her, "Thank you for helping care for 'our' children," even though they are not related and do not know any of the children at MRH.

It is not easy for CMMB volunteers to sacrifice months or even years of their lives for people they do not know. Emerald, remembering the life she left and the job opportunities she gave up explains, "[That job] didn't really need me. But here, my kids do need me. I know that many other volunteers can do the work for YES and MRH that I do... but my kids do love me, and they need me to love them, and work on their behalf to make sure they get all of the resources they need. So although it often breaks my heart to read the news from home and hear about all of the fun

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Adolf poses for a photo on one of his better days

HIV & AIDS in Uganda

The Uganda's success in fighting the HIV and AIDS epidemic has long been hailed by the international public health community as a "Best Practice" in sub-Saharan Africa. One of the hardest-hit countries in the late 1980s, Uganda quickly addressed the problem with education and national campaigns. Within a decade, statistics showed a drop from 15% of the population infected with HIV to only 5% in 2001. Although this data was encouraging, the fight is not over. Some recent data shows that HIV and AIDS cases are increasing in Uganda once again. Furthermore, the statistics mean little to the families and the children who are facing the effects of AIDS on a daily basis.

No matter what one's perspective is on AIDS — the global community must help innocent children affected by this disease. They have done no wrong. Many have lost everything that a child deserves: family, health, nourishment, love and support. Together, CMMB, Emerald, and MRH are working to provide these needs to children everyday.

Enhancing Our Kenya Footprint

CMMB Announces Expansion to Address Healthcare Needs in Kenya

In a discreet university-owned building, CMMB's new Kenya office serves as a base for our Nairobi staff working with clinics, hospitals, and programs in the Nyanza province. Building on our success as a healthcare provider in Kenya, CMMB has scaled-up its HIV and AIDS operations in Kenya, making quality healthcare available in the remotest areas of the country and making program operations even more comprehensive.

Located in Kisumu, the capital of Nyanza province on the eastern shore of Lake Victoria, the new office contains two important CMMB programs, *mothers2mothers* and Adolescent Male Circumcision. Kisumu currently experiences poverty levels at 48% and is surrounded by rural areas and inadequate healthcare.

Formerly a busy port town, the break up of the East African Community in 1977 coupled with the cessation of international ferry services on Lake Victoria substantially slowed Kisumu's once bustling pace. It is an area with a particularly high prevalence of

Without care, almost one out of every four mothers will transmit HIV to their newborns, and each year about 3 million of these children will die from HIV/AIDS-related illnesses.

HIV and AIDS and according to UNAIDS, HIV prevalence in Kisumu has been fluctuating, with the highest prevalence measured at 35% in 2000. As the third largest town in Kenya, with a population of approximately 355,000, the HIV-prevalence of young women is estimated to be 5 times that of their male counterparts, leading to the need for comprehensive support for HIV-positive women and new mothers. Without care, almost one out of every four mothers will transmit HIV to their newborns, and each year about 3 million of these children will die from HIV/AIDS-related illnesses.

The work in our Kisumu office will also complement the scale-up of CMMB's prevention of mother-to-child transmission (PMTCT) program, *Born to Live*, and provision of direct, long-term treatment and support to persons living with HIV and AIDS.

STAFF CHANGES

Based in large part on his many years of work on global healthcare issues in Africa, Dr. Salvador Garcia de la Torre has been appointed CMMB Senior Medical Advisor and Regional Coordinator, Africa. He will examine and identify opportunities for further growth in Kenya, and will serve as Kenya Chief of Party for CMMB's antiretroviral work. Dr. Garcia de la Torre formerly served as Country Director for CMMB's office in Kenya and, in his new position, will facilitate CMMB's continued growth in its programs in Zambia, South Africa, Swaziland, and countries in Africa. He will examine and identify favorable opportunities for CMMB's further growth in Kenya, and will serve as Kenya Chief of Party for CMMB's antiretroviral work.

Mrs. Doris Odera, as Acting Country Director, Kenya, has been named to direct CMMB's work in Kenya. She is responsible for overseeing the execution of all in-country activities, including the management of offices and staff members, keeping track of our involvement as a member of *AIDSRelief* and *Born to Live*, and managing our daily programmatic operations.

CMMB is thankful for Mrs. Odera and Dr. de la Torre's service in their capacities and look forward to progress moving forward as our programs in Africa evolve. ●

Visit CMMB Online



We invite you to explore CMMB's website, www.cmmb.org, to read stories, watch videos, and see photos of the people your donations help. You can also access all of our publications, including previous issues of *CMMB Today*, press releases, and annual reports. Visit the site to learn more about CMMB's upcoming benefit concert, Mahler for the Children of AIDS at Carnegie Hall.

Please also consider making your donation online. Giving online helps reduce shipping and printing costs for CMMB, allowing us to devote more of your generous donations to deliver compassionate and quality healthcare to those most in need. For more information about online donations, please contact Linda Kolk at lkolk@cmmb.org or 800-678-5659.

Fulfilling Life's Dreams and Missions— CMMB's Medical Volunteer Program

2008 marked a record year for CMMB's Medical Volunteer Program (MVP). During the year, CMMB supported 100 long-term volunteers in 27 different countries. 2009 also looks promising as more and more Americans look to make a difference in some of the most resource-poor settings in the world.

In addition to the 100 long-term volunteers, CMMB supported 351 short-term volunteers in partnership with other organizations—sharing the responsibilities of managing people who are truly changing the world.

PREPARING WORKERS FOR THE VINEYARD

In order to prepare its volunteers for the “field,” CMMB conducted a week-long orientation in New York for 20 new volunteers before they left for service. This pilot orientation was an effort to prepare medical volunteers for the realities of living and working in developing countries.

Experts on tropical diseases and medicines discussed the challenges they would face in the field, while CMMB staff and volunteer alumni prepared volunteers for the culture shock of abject poverty, combating malaria, sleeping under mosquito nets, and boiling water before drinking. Little did some of them know that those issues were just a small part of the volunteer experience. In his report from Swaziland written a few weeks after orientation, David Haproff—a medical administrator—reported on his first experience with poverty while making an assessment:

Thursday and Friday I accompanied Scott Stewart—a CMMB nurse—on home visits out in the bush. Very very interesting.

The most intense poverty I've ever seen. People literally laying in the dirt with nothing but rags. No food, no water, no nothing. They are so grateful for our help. The children are the ones that get to me. Many AIDS orphans. One 13-year-old girl caring for her three brothers and sisters because their parents have died. They are all HIV positive too. Yet they are still smiling and happy to see us. Really breaks your heart. A little goes a long way here. For example just distributing household bleach for them to purify their water to prevent diarrhea is so helpful and so necessary, but they don't have the money.

BECOMING A VOLUNTEER FRIEND

As more and more medical volunteers leave to meet healthcare needs in places like the Sudan and Swaziland, volunteers have been asked to invite their friends and family to support them during their year of service. Currently the cost of supporting a volunteer with health insurance, medivac insurance, housing, a US\$350 monthly stipend, and international airfare is \$15,000 on average annually. If you would like to support a volunteer, please visit: <http://support.cmmb.org/mvpsforchange>.

Together we are creating a great force of volunteers for world good. ●



Medical Volunteers and CMMB Staff pose for a group photo at the Passionist Retreat Center

Warm Homecoming

for CMMB Senior Medical Advisor & Regional Coordinator – Africa

On August 5, 2008 in his hometown of Mexico City, CMMB Senior Medical Advisor & Regional Coordinator — Africa, J. Salvador Garcia de la Torre, M.D., M.P.H. was recognized by Cardinal Norberto Rivera Carrera, Archbishop of Mexico City, for his service to those individuals most in need around the world. Cardinal Carrera, stated “Through both hand and heart Dr. Salvador Garcia de la Torre has worked to bring healing and wholeness, improve the quality of life, and save the lives of countless men, women, and children around the globe. His leadership is both inspired and inspirational as he labors to bring hope to the hopeless.” ●



Dr Salvador Garcia de la Torre beams as he receives his award from the Cardinal.

CMMB Volunteer Emerald Russell...

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places my friends are traveling to, and the fun people they are meeting, I still know I made the right decision in coming here.” That is the beauty of service and sacrifice — it enriches the lives of those receiving and those giving.

Despite the difficult days, like Emerald's experience with Adolf, the good days are always more numerous and the positive experiences are what will remain most in her heart when she departs. “What will I miss most about my time here?” asks Emerald, “The kids, of course. This year has been an amazing learning opportunity for me. I have a much more realistic understanding of the good and bad aspects of international aid. I am fortunate to have these lessons to take with me, as well as have such a special relationship with this deserving group of young Ugandans. As cheesy as it sounds, I know that I have benefited the most from this experience.”

According to UNAIDS data, children under age 15 account for one in six AIDS-related deaths worldwide, the vast majority infected through mother-to-child transmission. Ninety percent of the more than 5 million children who have been infected were born in Africa. Furthermore, approximately 15 million children under age 18 have lost one or both parents to AIDS and countless more children have become responsible for the care of siblings and other family members when their parents are debilitated by poor health. The problem of HIV and AIDS may seem overwhelming at times, but in the words of Edmund Burke, “Nobody made a greater mistake than he who did nothing because he could do only a little.” Emerald is doing something, CMMB is doing something, and each of us can find a way to do something, too. What a wonderful world we live in that we all have the opportunity to make a difference, big or small, in the life of someone else. ●

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Credits

Jennifer Boyer, *Writer*
 Ursula Brugger-Pereira, *Photographer*
 Megan Galbraith, *Senior Manager, New Media Communications*
 Richard Galentino, *Director, Medical Volunteer Program*
 Scott J. Hamilton, *Deputy Director, Communications*
 Lizaura Javier, *Coordinator, Medical Volunteer Program*
 Kiva LaTouché, *Communications Coordinator*
 Rose Matusiak, *Graphic Designer*
 Barbara Wright, *Director of Communications*

