THE MEDICAL MISSION SISTERS

The Medical Mission Sisters are a religious community devoted to the care of the sick in the missions.

Main Activities
Hospitals, dispensaries, home visiting, leprosaria, training native nurses, training native compounders, maternity and child welfare clinics, establishing native Medical Mission Sisterhoods.

Missions
Africa, India, Indonesia, Pakistan, South America, Southern U. S.

U. S. Houses of the Society
Motherhouse and Novitiate — 8400 Pine Road, Fox Chase, Philadelphia 11, Pa.
House of Postulate—4374 Grant Rd., Mountain View, Cal.

YOUR WILL . . . .

can help the Medical Mission Sisters bring health and healing to the sick and suffering of mission lands. The following approved form of bequest may be used:

"I hereby give (devise) and bequeath to the Society of Catholic Medical Missionaries (also known as the Medical Mission Sisters), an institution incorporated under the laws of the State of Maryland, and its successors forever the sum of $ . . . . . . . . . . . . . for its general purposes."

If you have already made your will, it is not necessary to make a new one. It is sufficient that a codicil be added, using the above form.
Francis Xavier is doubly honored by Medical Mission Sisters. As patron of the missions, he is our exemplar and advocate; as apostle of India, he is the staunch support of all who share the labor of his vineyard. Something would be lacking if the pages of the Medical Missionary did not contain some word about the Apostle of the Indies during this month when the 400th anniversary of his death is being commemorated.

Xavier's life was a dramatic one—so dramatic that some authors cannot resist giving us a legendary, theatrical, "too good to be true" account of the Saint. When a man renounces fame, travels hundreds of miles on foot in strange countries, paralyzes his arms with weariness by baptising thousands, evangelizes three lands and restores life to 57 persons, it is difficult to keep the superlative and sentimental from running away with your pen. Men are quick to see the beauty of a thing but all too often little thought is given to the cost of that beauty. Francis Xavier has been called the greatest missioner since Saint Paul. How much did it cost him to be in the front line of the "missionary great"? What was the price of Xavier's glory?

Eminent scholar and successful professor that he was, the din of a nagging beggar-student's words did not fall easily upon Xavier's ears. "What doth it profit a man to gain the whole world?" It cost to acquiesce to Ignatius' demands but Francis paid the first installment on the price of sanctity and joined the followers of Loyola. Together the founders of the Society of Jesus journeyed to Rome, the hard way, on foot, tramping up and down the mountain passes.

Assigned to preach in Bologna, Xavier gave much of his time to the personal attention of the poor sick in the hospitals of that city. Care of the sick in those days was considered an unhealthy and undignified task. It cost the man of letters to wash the filthy, and soil his hands with the pus of their sores. A change of assignments and another price to be paid. He was abruptly removed from a successful active apostolate, to the confines of his superior's office. As a secretary to Ignatius,
Xavier's contact was no longer with souls but with letters and files. Having temporarily chained his desire for apostolic activity among men, Xavier grew content to work at the side of his well-beloved general in the serious and important task of guiding the Society. Then suddenly Ignatius interrupted his secretarial duties with the statement: "You, not Bobadilla, shall sail to the Indies."

Previous to his appointment as missionary to India, Francis Xavier is never recorded as having expressed any desire for foreign mission work. But the order having been given, the soldier immediately set about its execution. Anchors away, meant sacrifice. It meant leaving Ignatius. The journey was long, dangerous and difficult. Close association with sailors of questionable character must have irritated the gentleman, the saint. To make matters worse Xavier had to cope with that devilish disease, seasickness. Filled to overflowing with love and zeal, ready to conquer all for Christ, Xavier reached the land of his apostolic labors. There he found no waiting Indians eager to embrace the God of Love, but a formidable barrier of apathetic indifference. Neither did he find colonies of exemplary Portuguese Catholics, but Portuguese Catholics drunk with power and wealth, living as traitors to the truths of their Faith. Ice cold water thrown in the face of his dreams.

Sanctity is yours, if the price is paid in full. So the Basque gentleman lived in a castle of palm leaves, dieted on rice and water, stumbled in a strange language, endured the loneliness of a man, who being accustomed to the companionship of University fellows and religious brethren, finds himself cut off from all association with men of like ideas, a scholar without any books, an idealist without the stimulus of encouragement.

In Europe, people flocked to hear Francis preach. His sermons stirred men's emotions, moved their wills. In India, he roamed the streets with a tinkling bell gathering children to his side. The famous preacher taught them faltering the Catechism he had memorized in their own language, while adults watched in amusement. Given the responsibility of the whole Indies, the apostle explored regions where Christ was unknown and consolidated those whom he had converted. Traveling here and there, never able to finish the task completely, he battled contradictions from Portuguese and Indians. He fought the disappointment of his own inadequacy.

A million souls baptised, apostle to India, Japan and Malacca, all that was nothing for Xavier. His love could only see the souls that were still in ignorance of their Christ. As long as there were souls separated from God, Xavier could not be satisfied.

Xavier was a struggling missionary, not a conqueror. He struggled for ten years, years crammed full with prayer, penance and apostolic activity. Then on December 3, 1552, on the island of Sancian while waiting for a ship to China, Xavier paid the last price, that of his life. The burden of sanctity was lifted to become the cause of eternal glory.

Francis Xavier shows us what one man can do for God . . . not a "plaster of paris saint" but a man of flesh and blood who has devoted all his energy, all his faculties, every bit of himself to the service of God. Xavier is great, because of the measure of his love. The fire that he started must be continually enkindled until the burning love of Christ scorches the whole world. But that love must first burst into flame within the hearts of individual missionaries for it is in them that the love of Christ is to be carried.

Sr. M. Richard, S.C.M.M.
If ever the fires of the Catholic missionary spirit are especially "stirred up" by holy Mother, it is during Advent. There is in this liturgical season, perhaps more than in any other a feeling of urgency, an eagerness, one might almost call it a "breathlessness," that something happen, that something be accomplished. We hear repeated over and over again the cry: Hasten, tarry not, COME... and do this quickly!

What is this "something" that the Church eagerly desires will happen? What is this "coming" she urgently begs for? "Behold there will come the desired of all nations... and His Kingdom shall have no end: He is God, the Mighty, the Ruler, the Prince of Peace, Alleluia, Alleluia" (Antiphons from Lauds, Fourth Sunday of Advent). It is the coming of Christ and the establishment of His Kingdom, Advent regnum tuum! This is what the Advent liturgy would "stir up" in us: the longing for Christ to come and manifest Himself to all nations: to come and take possession of His inheritance, to come and rule over all the princes of this earth of ours.

The Advent longing is a missionary longing. This COMING of Christ to all peoples and the planting of His Kingdom in their midst is precisely the goal of the missionary Church. Missionaries are those whose vocation it is to HASTEN that coming, to TARRY NOT in the building-up of that kingdom, so that all may share in the riches of such a King, so that all may be the heirs of such a kingdom. For Christ is "the desired of all nations"; and we know that the sooner His Kingdom COME here below, the sooner He rules over the hearts of all men, the sooner will He COME again, not this time in "quiet silence" to the womb of the Virgin, but "in the clouds of heaven... with great power" to bring the "children of light" with Him into glory. "And this gospel of the kingdom shall be preached in the whole world, for a testimony to all nations; and then shall the consummation come." (Matt. 24:14)

Let us open our hearts to this missionary message of Advent. Let the Advent Liturgy "stir up" the "blue-bleak embers" of our missionary spirit to be enkindled anew. For all of us, whether missionaries by vocation or by the fact of our being members of this missionary Church, we must everyone be "on fire" with zeal for the COMING of the Kingdom, that the Christ-fire within us cast itself over the entire face of the earth, so that there be no one "who can hide himself from its heat." And we must long for this with a longing that burns us, until we ourselves become such a "consuming fire" that Christianity cannot help but be the world-confagation the Church so ardently desires.

We know also what will be Our Lord's answer to this longing of our hearts: "The Lord will come, and will not delay, and He will bring to light the hidden things of darkness, and will manifest Himself to all nations, Alleluia." (Antiphon from Lauds, Third Sunday of Advent)

Sister M. Gerard
A Christian Solution to the Social Problem in South Africa

Today in a world where thousands are giving their lives for freedom and the equality of all human beings under God, three million reasoning, thinking men and women, professing a Christian belief, living in comfortable homes, with ample food and drink, opportunities for recreation, education and one of the highest standards of living in the world, can apparently shrug off the Annual Report of their Department of Health stating: “While it may appear startling that the majority of natives die of starvation, it is nevertheless true.”

Such is the South African situation which the Holy Father has recommended to our prayers this month. There, a European minority rules some 13 million non-Europeans: negroes, colored (mulattoes) and Asians who are forced to live in “poverty and sheer stark starvation” with little or no opportunity of bettering their lot in life.

The European class in South Africa can be divided into two main groups—that of the Afrikaners, descendants of the original Dutch settlers and that of the English. According to the Most Rev. Sigebold Kurz, O.F.M., speaking at a Missiology Institute last Easter, the Afrikaners for the most part belong to the Dutch Reform Church, are firm believers in the doctrine of predestination and as a result see no incongruity in their conduct. Through their good fortune they were made white and destined to be the ruling people in the land. They do not look down upon the blacks as people; they don’t even consider them people. To maintain this fundamental principle of
their superiority, from the very beginning they have followed a policy of apartheid (compulsory separation of the non-European from the European).

The original inhabitants of the land were driven out to give way to the white. To build their cities and work their mines which contain the fabulous fortunes of S. Africa, workers were enticed to come to work in the mines in spite of the policy of apartheid, as stated by the Minister of Labor in 1942: "The non-Europeans will never have the same rights as the Europeans; there will never be social equality and the Europeans will always be 'baas' (retain power) in S. Africa."

Apartheid is their means of safeguarding themselves, of keeping the African under control—legal measures applying the color bar to qualified work, laws on districts set aside for natives and the notorious Pass Laws. Such an inhuman situation has made it possible for Julius Lewin, a S. African lawyer to declare that: "The legal position of the African is such that any one of them, walking down the main street in Johannesburg, at any time of the day or night, may be arrested by the police, and a procurator who is more or less clever will have no difficulty whatsoever to find fault with the defendant."

On the whole there is no possibility for the blacks to claim any basic human rights or to protest against such an unjust state of affairs. The workers in the mines are not allowed to organize into labor unions, the workers on the farms who are cruelly mistreated are often shot, those who are convicted of transgressing one of the multitude of regulations which make their lives unbearable are given to farmers as laborers while paying their "debt to society."

One might ask why don't the blacks stay on their farms and live in their old tribal manner? The solution is not so simple. The white man has levied taxes and to pay these taxes, the black man has to come to the city and earn the white man's money. As a result these workers by the thousands leave their farms to the women, children and old people and come to the city for several years at a time. Left on their own in a strange, new, civilized world, without any contact with their relatives and tribe (due to illiteracy) which the white man has not seen fit to remedy) these workers are segregated into locations of as many as 40,000 men living in one place, open to all the temptations and vices resulting from such an environment. As Alan Paton remarks in Cry the Beloved Country, "It suited the white man to break the tribe, but it has not suited him to build something in the place of what is broken." This disruption of family life resulting inevitably from a migratory labor system besides "breaking the tribe" is causing less and less food to be produced with one result that in a country where the Euro-

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November-December, 1952
pean death rate from tuberculosis is the lowest in the world, the non-European's is the highest — 20,000 non-Europeans die every year of tuberculosis while 40,000 seek admission to native hospitals which are rare. Out of every four babies born to a native mother, one is doomed to death before it reaches one year.

One is not surprised, therefore, as Monica Whately after a trip through S. Africa reported. "When one sees the hovels into which these children are born. In native townships the non-Europeans are herded together like vermin and compelled to reside 50, 60 and 70,000 to a location often without water, sanitary arrangements or roads, without light, space or the minimum deencies of life. I have seen as many as 14 members of a family living in a crate manufactured for the export of one ear, a piece of sack hanging over the opening. Inside it was pitch dark, without a window, without light or a through-draft. Usually there was one old rusty bedstead on which as many of the family as could rested. The others would lie on the mud floor, old men, young men, old women, young women, and mothers of children. Their staple food was in a pandin-tin, containing meal porridge, black with flies, in the corner on the ground. The naked children were covered with flies that also filled the eyes of the babies."

The problem in S. Africa today which the Holy Father earnestly entreats us to pray for is basically a racial one—how can these various racial groups be integrated into one homogeneous society? Basic human rights founded on man's "human dignity" as a child of God—rights to family life, to work, to develop one's capacity, to education and the opportunity of improving oneself—must be given to all peoples.

The problem in S. Africa is made more complex as the Archbishops and bishops of S. Africa pointed out last June by the fact that the "majority of non-Europeans have not yet reached the stage of development that would justify their integration into a homogeneous society with the Europeans."

Also Archbishop Denis Hurley, O. M. I. of Durban stated much harm can result by insisting on contingent "rights" without corresponding responsibility. He cited the "right" to vote as an example of a contingent right which demanded a great deal of political maturity and responsibility. He further urged that the evolution of the non-European be studied and his economic, cultural and political rights adapted accordingly. "Education must be spread, avenues of employment opened up, and the iniquity of the Color Bar Act removed."

The solution to the cancerous problem of S. Africa will be brought to the council tables of the world, but Our Holy Father knows that such a difficult task can only be made lighter by the "prayers, good will and cooperation of all who earnestly desire to see justice and peace reign in this country, and who sincerely believe that it is a Christian duty to love one's neighbor as oneself." (Bishops' Statement, 1952)

Sr. M. Janet, S.C.M.M.

R. I. P.

Eternal rest give unto them, O Lord

Rev. Edward Burns, C.S.C., South Bend, Ind.
Brother Leander, C.S.C., South Bend, Ind.
Sister M. Thecla Shearon, S.S.J., Hartford, Conn.
Mrs. Anna Alessi, St. Albans, N. Y.
Mrs. John Fagin, Wilmington, Del.
(Mother of Sr. Ursula, S.C.M.M.)
Mrs. Marion F. Lorenz, Chicago, Ill.
Miss Rose McKenna, Phila., Pa.
Mr. William Morris, Phila., Pa.
Mr. John Nash, Bronx, N. Y.
Mr. Edward Pfeifer, Queens, N. Y.

November-December, 1952
WELKOM
IN
SOUTH
AFRICA

Sr. M. Agatha, R. N.

Welkom is very new. Four years ago it was still a desert. Since they have found gold, building has started at a very rapid pace. At this writing there are 8,000 Europeans and 12,000 natives living here in Welkom, Orange Free State. The natives are hired by the Mines and come from Swaziland, Basuto, and also from other states of South Africa. There are many men here without their families. They (the natives) live together in several compounds, more than four thousand together. And every day more people come. Everything is building, building. When I came here a few months ago there was only one road; now there are many—everyone makes a new one for himself.

Eventually our hospital is to be only for the natives. Now there are some European patients but that is only to help out until they get their own hospital. At present it is able to care for about 320 patients — 8 wards of 40. In the surgical block there are five operating rooms. Next to it are the physical therapy and x-ray rooms. What makes life so complicated is that we are trying to care for Europeans as well as natives. Thus everything must be double—
you must not use the same instruments for both—you must not use the same rooms for both— etc., etc. The Lord never meant it to be thus.

What language do we use? We are studying Sesotho, one of the Bantu languages which most of the natives understand. Then we have to speak English for the doctors. (The real English do not want to speak Afrikaans.) We speak Afrikaans for the Boers. They hate the English so they will not speak English. But one thing the Boers and the English agree on—is their opinion of the natives. I did not know that such hatred of fellowmen could exist.

Last week a cousin of one of our native orderlies came to see the hospital. We gave her a cup of tea and talked to her a short while. Afterwards she mentioned to the orderly that she did not understand why we were so kind. He said: "because they are religious and Roman Catholics." He is not a Catholic himself.

We have native orderlies in the European wards but they are not allowed to do anything except bring the food trays and clean. When they are free, they are only allowed to walk to their compound. When they want to go elsewhere, they have to have a pass. Near to our hospital is a native location called, "Thabony" where the married people live. They are only allowed to live there if the wife is going to work too! One of the Dominican Fathers is trying to get land just on the border of that location to build his church and presbytery. And one of the first things he is going to do is to start a "Crèche" where the children can come during the day. There are 1000 native Catholics in Welkom.

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Peace

How earnestly the Church desires to smooth the way for friendly relations among peoples! For her, East and West do not represent opposite ideals, but share a common heritage, to which both have generously contributed and to which both are called to contribute in the future also.

By virtue of her Divine Mission she is Mother to all peoples, and a faithful ally and wise guide to all who seek peace.

The way leading to true peace is long and hard, and impeded by briers and thorns. However, the great majority of men are ready to make the sacrifice in order to be preserved from the catastrophe of new war. Still, the undertaking is so great and merely human means so ineffective, that we turn our face to Heaven and raise our hands in supplication to Him Who from the Glory of the Divinity came down to our level and became "one with us."

The power of the Savior, Who moves the hearts of rulers wherever He wills, like the streams of water whose course He regulates, can still the tempest that tosses the bark, when not only the companions of Peter are alarmed, but the whole human race.

Pope Pius XII, Christmas 1950
When the people of the United States celebrate Halloween, the people of India are celebrating Diwali, their New Year’s Day.

Diwali, which is supposed to symbolize the victory of good over evil, light over darkness, is a festival of lamps and illumination. It is a day of fresh beginnings, of happiness and kindliness.

On Diwali day, towns and villages, houses and business premises, are all lit up by electric bulbs or tiny earthen lamps. Rows of oil lamps perched on roof-tops, highlighting every line, or on little rafts launched on rivers, lend a picturesque touch. There are also fireworks at night.

During the day people exchange greetings and gifts. While all join in the celebration, children get the most fun out of it. Candy in all colors and shapes is eaten. Even the poor and the Spartan parents allow a little indulgence to their children, saying: “After all Diwali comes but once a year.” Schools are closed for a week or more. In some parts of India, for instance in Mysore and Bombay province, the Diwali holidays extend to three weeks or a month and constitute the half-yearly or terminal vacation.

There are many legends regarding the origin of Diwali. Some say it was originally to celebrate the coronation of the ideal King Rama, the hero of the epic Ramayana. Some say that it is a festival of rejoicing at the triumph of Krishna over a demon. On the 14th day of the warning moon of this lunar month, Krishna destroyed Narakasura and the death anniversary of this demon and therefore of the victory is observed as a sacred day. And the illumination, legend has it, was meant to keep all evil spirits away.

Diwali also marks the beginning of the Hindu commercial year. On this day many Hindu merchants renew their account books and paint and decorate their offices. They try to collect the outstanding dues and debts before Diwali and start on a clean slate that day. There is vigorous buying and selling in the few weeks preceding Diwali. There are lavish window displays of gorgeous saris, jewelry and toys. Like Christmas Day for the Christians, it is a day of rejoicing and merrymaking.

The lights that shine out into the darkness on Diwali day have also a deeper meaning. These represent the hope of greater enlightenment, and the holy anointing done on the morrow of the festival is associated with the cleansing of the spirit.
Sister M. Ursula, (Wilmington, Del.) starts her Christmas shopping for Holy Family Hospital, Karachi.

Let’s check that list—presents for nurses, hospital help, little Gertrude (a permanent cripple since birth twelve years ago)—the two old blind ladies—the paralytic man, etc. etc. Those Moslem ladies may be heavily veiled, but listen to them bargain.

Indian spice ‘n everything nice—piles of rice and heaps of spice. We will need several kinds of spices for the Christmas Pilao and curry. Pilao is rice with raisins, butter, chicken, browned onions and almonds. Would anyone prefer turkey to this? A whole donkey cart will be needed to get these things to the hospital.
Soap is always a welcome gift. This is not a case of "No Soap," but "Which Soap?"—English made "Lifebuoy" or 'Pakistan Peerless?' Current trends are to support home industry and the good quality of some of the products encourage that.

Just the fruit for our Christmas breakfast: Honeydew melons from the Pakistan Supermart. When the proprietor can squat on the counter, it saves store space, enables him to keep an eagle eye on his wares and assure prompt service. Oh, I must not forget the candles for the trays. They were perfect last year, set in little paper decorated bottles and supporting Christmas cards.
Next—to the cloth market, I hope there is still some white flannel for sale. Warm flannel coats for our babies—one has to experience the December nights in Karachi to appreciate what good gifts these make—even if the temperature is 112 degrees the rest of the year.

The end of the shopping tour for more than one concerned! This one looks deep in righteous repose. More camels prefer Karachi than any other shopping center!
PATNA

Patna is in the midst of the monsoon and prickly heat season. The grass is high and the cane bed looks like a corn field. The tree at the end of the maidan is a giant green mushroom, giving welcome protection from the sun or rain as the day brings forth its elements.

Crowded conditions continue. The patients are practically overflowing the verandah, leaving hardly any space to move around. We hope you are all praying with us that we will get our new Holy Family Hospital soon.

Even the white ants are doing their best to drive us out (out of my head)! Especially in the classroom. It almost makes me weep to see all the damage they’ve done to the magazines, charts, and books and are now even attacking the skeleton.

Sr. M. Cyril, R. N.

POONA

The monsoon is almost over. How can I tell? The other day we had some sun and it was strong enough to bring out a few freckles. It is raining now but the showers are petering out after three solid months of rainy days. Absolutely everything is moldy... my bed, my shoes, prayerbook, clothes, etc. And their smell! I could use a tank full of Tabu. An added attraction are the bugs of every size, shape, and variety, to say nothing of their numbers. We’ve coined a new gimmick for India... India where even the bugs have bugs.

Sr. M. Richard

Our house still bears the traces of the monsoon. On one wall we have practically the whole map of North and South America traced out by the dampness and the mold. What follows now is hard to believe, but all of us vouch for its truth. Our walls showed little bubbles which grew and finally pushed off the plaster. Guess what was underneath? Germinating beans! The beans must have been mixed with the cement and the continual dampness caused them to germinate.

I suggested to Sr. Xavier that we let the beans grow and develop something like the “Hanging Gardens of Babylon.” But Sister had us “dig up” the beans and all we have is little holes in the walls. Too bad!

Sr. M. Henrietta

MANDAR

This monsoon is open house for all the wee and not so wee crawling, flying, and hopping things. Just a few nights ago, the Sister-Doctor when awakened, was prompted by that famous “sixth sense” to flash her light on the chair next to the bed. Lying within three feet of the rungs was a small snake bearing the unmistakable markings of the cobra clan.

 Needless to say, all the Sisters have developed a fervent devotion to St. Patrick. We think it would be a good idea for some art shop to have large pictures of said Saint painted — preferably the kind that glow in the dark.

Sr. M. Thaddeus, R. N.
his wares. He had beautiful rugs, bedspreads, and cushion covers — so there we sat with our old threadbare rug. We told him we didn't want any, but he showed them to us anyway. They were made in Kashmir and the work was exquisite. He left with the remark that our rug would be nice when it was finished. How's that for diplomacy?

Sr. M. Carol, R. N.

MAKASSAR

Our work is always increasing; today is the 205th delivery of this month and the month is not over yet. The school flourishes — 30 students: 10 Catholics, 10 Islamists, 9 Protestants, and 1 Adventist — from 9 races. We are receiving many requests from aspirant-students which shows that our girls are beginning to like education. We even hope next year to get some students from the islands near New Guinea — Molukkeu, Kei, Tanimbar. Kei and Tanimbar have a very primitive population.

Our new maternity clinic cannot be opened yet. The main building is ready: rooms for 12 poor patients and 10 paying patients, plus a delivery room with 2 beds. The other buildings: kitchen, laundry, doctor's and midwives' rooms, polyclinic are not empty yet. Three families are still living there, who have to get lodgings before they can leave. This is very difficult as Makassar has a housing shortage for 2000 families.

Sister M. Martha, R. N.

SANTA FE

We had a very interesting visitor from Burma, Madame Aung San, the Directress of the Maternal-Child health program. This division also includes schools of nursing and midwifery. She was most generous, explaining the customs and traditions of Burma. You would have enjoyed meeting her.

Sr. M. Patrick, R. N.
RAWALPINDI

If I have trouble speaking Urdu (and I do), there is one consolation: The men have as much trouble speaking English.

Last week Sister Bernadette brought a man to my office. He looked as if he spoke English . . . so I asked him IN ENGLISH what he wanted. He answered IN URDU that he wished to make arrangements for his sick wife. Obligingly, I asked him IN URDU what sort of operation she required. He answered IN ENGLISH. After a hearty laugh, I ascertained just which language he wished to continue our conversation in. It was English, of course.

Sr. M. Christopher

MARACAIBO

We owe one of our best standing jokes to Sister Victoria, our hospital bookkeeper. As a patient was leaving the other day, she went through his chart very carefully. All his medicine bills had come from the pharmacy, but there seemed to be an item that wasn’t included. Calling Sister Ann, the pharmacist, she asked the cost of this item “EPISTAXIS . . . a few ounces.” She found out it was a nose bleed.

Sr. M. Deegan, R. N.

PATNA

Last week we received enough rice from the UNICEF to feed 65 poor people once a day for three months. Our hospital received the second largest amount.

After the visit of the doctors from the W.H.O., they sent us candy for all the patients.

Sister M. Adelaide

THREE MEN (Continued from Page 306) young boy was brought in with rabies, which is one of the most terrible of all diseases, and one for which there is no curative treatment, only release by merciful death. He had been bitten by the same rabid dog, and had not thought it necessary to have treatment. None of those who came for injections developed the dread disease. Of the others, the badly bitten ones all died.

Sr. M. Lastitia, R. N.
It was an ordinary day with ordinary happenings when the nurse brought an expectant mother to me for admission. As is the custom in this country, there was another woman with the patient—usually, the mother-in-law or sister-in-law—but this time it was the girl’s own mother.

After the patient was made comfortable in bed and routine examinations were finished, I left, in order to pick up some information slips. On my return, the mother was, or rather had almost finished, setting up light housekeeping in one corner. A “sirat” with a metal drinking glass over the top stood to one side and next to it a small cup-like pan with milk in it. Protruding from a bundle of not-too-clean material were a couple of large rolls and a hand fan used occasionally to tease the flies away from the food. Oh yes, all bunched up and pushed into a corner, was the one-time white burkha. This wasn’t novel. All, and especially the poor, do it and the nurse just steps around or over, or between, everything and anything that’s in her way.

My spoken Urdu would never be mistaken for that of a native of the country but it is such that a limited conversation can be negotiated so I began the routine history quiz. My first question, following the admission form, was “Name, please?” The mother, not the patient, turned out to be the spokesman.

“Why you know Mumtaz—she had her other baby at the ‘Old Hospital.’ My facial expression must have been a little blank, or at least surprised, because her good-natured indignation continued with, “and her sister, Iqbal, had twins at the ‘Old Hospital,’ too!”

That was supposed to clinch the matter. I smiled with what I hoped was a smile of remembrance and dashed on to the next question. “Where do you live?” The words were hardly out of my mouth when I saw that I was going to get another incredulous burst from the mother. “But Mumtaz had her other baby at the ‘Old Hospital!’” Pretending I hadn’t heard, I hurried right on. “It is Arya Mohalla you live in, isn’t it?” I had guessed it. Before the pleased look faded from her face, I took one more chance. “But I don’t remember your house number.” That didn’t seem to perturb her and she gave me a ready answer. My lucky guess was opening the way for other needed informa-
tion and for a time I made out beautifully. Suddenly, however, I hit my waterloo. "How old is the other baby now?" (only 38,000 patients admitted last year!)  
"He died in the 'Old Hospital'—don't you remember?"
I didn't dare stop. "What was the matter with the baby?"
"But he was in your hospital, you know! She couldn't believe that I didn't know all the details. 'He had fever and dysentery.'"
With that fact gained, more or less, I decided to leave well enough alone, and retreated.  
The next few hours were a little difficult for Mumtaz but she was a good patient and both she and her mother were grateful for all the medicine and attention that we gave her. The crowning success of the day, however, was the delivery of a four pound fourteen-ounce baby boy. Such a little fellow, but he had lung power and kicking energy for twice his size. Judging from all the smiles, thanks, bows and hand patting, you would almost think I had performed a miracle instead of just doing my part as nurse-midwife.  
Mumtaz was taken to her room and I didn't expect to see much more of either her or her mother. But she was not to slip out of my life so easily. Every noon or evening when a different relative or member of the family came to visit, Mumtaz's proud mother would shepherd them around the hospital until she found me and we were all properly introduced—they have a good sized family, too! And listened to family histories, too! Believe me, never again will I have to ask — does anyone here know Mumtaz? I know all about Mumtaz and her baby at New Holy Family Hospital!

**IMPORTANT NOTICE**

Due to ever increasing costs of printing etc. we are forced to raise the subscription price of The Medical Missionary Magazine beginning with the Jan.-Feb. 1953 issue. Rates: 1 year $1.50; 3 years $4.00; 5 years $6.00. Foreign: 1 year $1.75; 4 years $6.00.

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Philippine Stand on Birth Control

Dr. Juan C. Salcedo, Philippine Secretary of Health and President of the Fifth World Health Assembly, stated that the Philippines would "unalterably oppose birth control if presented at WHO meetings in regard to solving over-population problems." Secretary Salcedo pointed out that birth control is unnatural and is no solution to population increase problems.

A survey completed in July, 1951 shows that the Philippines have over 40 million acres of arable land. A little over 8 million acres are cultivated at present. With proper agricultural and economic developments, the Philippines can easily support 45,000,000 people. (Its present population is 20,000,000.)

Dr. Salcedo made these statements during a press conference. They were a reply to a release of the Survey Division Chief of the Philippine Council for United States Aid. The release advocated birth control and greater food imports from abroad to meet problems created by the current rapid population increase.

—Providence Visitor

Medical Missions of the Sahara

As Father de Foucauld, the hermit of the Sahara, said — the Moslem must see a Christian at work and at prayer before he will give the Christian religion even a second thought.

One characteristic need of the people is the cure of eye diseases caused by long exposure to the sun and drifting sands. The White Sisters’ hospital at Biskra has been doing Medical Mission work for fifty years — breaking down prejudice and bringing the Charity of Christ to the Sahara.

Eternal Witness

It is gratifying to note the response everywhere to Our Holy Father’s missionary Encyclical Evangelii Praecones. The first to come to mind is the great Mission Congress in Aachen last August, at which Rev. Pierre Charles, S.J., repeated what might almost be called his by-word: The need for intellectuals to know and hence to study missionary lands.

One fine example of such study is the yearbook "Eternal Witness" which, incidentally, was inspired by the Mission Encyclical. It consists of a collection of papers written by the undergraduates of Marygrove College, Detroit, Michigan, in which they treat in some detail "the considerations explicitly emphasized by the Holy Father or implicit in his comments, suggestions, and recommendations." (from the Introduction.)

The Eternal Witness is a real accomplishment and a model for other colleges who wish to harmonize their vocation as students with the intellectual Mission apostolate.

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Though our regular rates must rise, (see p. 292), we are holding the lower rate over the Christmas season, to accommodate those of our friends who wish to put THE MEDICAL MISSIONARY on their gift list.
Lay Medical Missionaries

Lucie Denoel, of the Volunteers for Service in the Missions, writes in the September-October, 1952 issue of PAX ROMANA about things accomplished in Africa by lay medical missionaries.

The first doctor sent by the Medical Aid for the Missions organization of Brussels began work in the Belgian Congo in 1927. Since then, 50 doctors have succeeded one another in the various mission services.

In 1934, 150 lepers were entrusted by the Native Administration of British Nigeria to a Belgian woman doctor. This work has expanded to 20 isolation villages, where life once again has taken on a meaning for 5,000 lepers. The staff consists not only of lay medical missionaries, but also of a large number of African nurses, teachers, catechists, artisans and agriculturalists trained by the Center to collaborate in one same Christian spirit to promote the moral, social and material well-being of the lepers.

A hospital was opened in 1936 in the Cameroons. Dr. Aujoulat, its pioneer, sought to reach the hearts and souls of the patients through his professional activities. As a result of his work, a native Catholic Action was established for the first time in Africa. Now the Cameroons possess a laity able to penetrate the institutions of the country with a Christian spirit.

In the same publication, Reverend T. Mathias, S.J., writes that the need for medical missionaries is particularly urgent in all Asia, except perhaps in Japan. Father Mathias urges young Catholics, "with a spirit of Christian love and a desire to make Christ and his charity known," to answer the appeal of the United Nations for young men and women to serve in the UN technical commissions in Asiatic countries. Why should young Catholics step forward as "technical" missionaries? PAX ROMANA relates the answer given at the Mission Congress held at Aachen, Germany on Pentecost, 1952: "Such conditions should be of concern to the Christian, not only because they are the breeding ground for Communism, but even more because they are unworthy of the Savior Who came to seek all of these peoples, that all might be saved in Christian dignity."

Progress at Hansens Home

Sister Mary Magdalen, Medical Superintendent of Hansens Home, Jamaica, B.W.I., reports that the new drug, Diaminodiphenyl-Sulfone is effective for both the Lepromatous and Tuberculoid cases of Hansens Disease (Leprosy).

During the five years that this Marist Sister-doctor has been working at Hansens Home, there have been 105 discharges as arrested cases. Not one case has returned with a recurrence of the illness to date.

At present, there is a total of 145 patients: 85 men, 60 women and 5 children. The small number of younger patients is due to the fact that the new drug makes it possible to clear up the disease in children very rapidly. After discharge, all patients must report to the local Health Officer for check-ups.

—Damien Dutton Call
“Kaw, kaw.”

No, it wasn’t a crow, it was merely the African way of saying: “May I come in?” Without waiting for an answer, a woman entered carrying a large enamel basin on her head.

“Three men in there,” was her opening remark.

“Three men where?” said the Sister.

As she spoke, a feeble little wail floated out of the basin. The woman lifted it off her head, and sure enough, there were the three “men” — about thirteen inches long, and each weighing about three pounds.

“They were born in the bush about twelve hours ago, and I started out right away. I knew that you could save them.”

“Where is the mother?” asked the Sister, eyeing the three small men doubtfully.

“I am the mother,” murmured the woman exhaustedly. “It was a long walk.”

“Glory be!” ejaculated the Sister, “you walked all that way directly after the babies were born?”

“Of course,” said the woman, “I had to get here quickly, so that you could start saving them.”

With great effort and a vast amount of prayer, the Sisters managed to send the mother home after a couple of weeks with two survivors. For she had to explain one morning that one was “missing somewhere” (the African way of saying that it was dead). It might have been missing from Holy Family Dispensary, but it was safely tucked away in Heaven.

Slight Error

“How is your dog bite today?” asked the Sister as the patient came into the dispensary for an anti-rabies injection. The child and its relatives stopped suddenly and looked at the Sister in surprise. Solicitously she repeated her remark. Still no response.

“What did I say that was wrong?” she whispered to an African nurse.

“You inquired after the health of the dog,” was the twinkling reply.

As Sister gave the child the injection, the mother said that the dog was still running around biting people, and that several of them intended to come for treatment. But two or three thought it unnecessary. What did Mammy (Sister) think?

Sister explained the necessity of the girl coming regularly until the course was finished. Some weeks later a (Continued on Page 303)
Against The Stream

AGAINST THE STREAM — By Francis Schimlek, C.M.M. Marianhill Mission Press (1949—145 pp.)

This short book tells of the activity-packed life of Fr. Bernard Huss, a Marianhill missionary in South Africa. This priest, who as a novice asked, “Which are the carrots?” when sent out to the garden, became, by hard study and dominating perseverance, one of the foremost agricultural authorities in South Africa and a social leader of the Bantu people. As principal of St. Frances College in Marianhill Fr. Huss wrote his own text to instruct young farmers and future teachers.

“Tickling the soil with a hoe, or scratching it with an excuse of a plow” sufficed when the natives were few in number (periodic killings helped out), but the British stopped the murders and settled the nomadic Bantus on native locations. The natives, in these new circumstances were barely able to earn their living and Fr. Huss, by preaching his “Gospel of the Land” tried to show them how to make a living from the soil and thus become capable of surviving the new influx of civilization. More important, he wanted them to be able to make their own the only vital element of that civilization, namely, Christianity.

For close to 50 years Fr. Huss worked in Natal and the Cape Province. His labors as educator, lecturer, and social leader were ceaseless. That his zeal did not falter in face of misunderstanding, native conservatism and lethargy, and the elusive undercurrent of witchcraft is proof of his supernatural motivation. How belief in witch doctors hindered scientific farming, and thus all material advancement, Fr. Bernard tells,

“When the natives saw my good crops they said it was on account of manure. The mouth said manure, but the heart said ‘medicine.’” (witchcraft to them).

But some measure of tangible achievement came to Fr. Bernard in return for his efforts, prayers, and sufferings. One day Gandhi came to visit the college of St. Francis and Father Bernard showed him the benefits the Bantus received from christian education. So impressed was the Hindu leader that he made this classic retraction: “You know that I once said I liked Christ and His teaching, but did not like Christians... if I had met more people like you I think I would have liked Christians.”

There are more recognitions—the Carnegie Corporation Grant to visit America and study the Negro problem, the Catholic African Union to carry out Father Huss’s plan on cooperatives and realize “Better homes, better fields, better hearts,” and the many congratulations and letters of gratitude from native and government leaders. Perhaps Father Huss’s most lasting achievement came after his death when “the minister of education announced that the Bantu would be educated, and that this education would be entirely on Christian lines or not at all.”

Against the Stream is more than a missionary biography—it shows us, besides personal heroism, the difficulties arising from racial prejudice and a cultural crisis. As Father Bernard Huss saw so clearly, “God’s providence has brought White and Bantu together... and God will also provide ways and means of solving the problem between the two races.”

Sr. M. Julia, S.C.M.M.
Dear Friend of St. Joseph:

St. Joseph certainly had his "ups and downs" this year, helping us collect funds in the U. S. and in India for our new Holy Family Hospital in Patna. Right now thousands of bricks are lying in heaps on the site of the new hospital. It looks as if St. Joseph is on a "sit-down strike", but actually there is not enough money to pay the workmen.

The Sisters simply cannot face another year in the old overcrowded hospital—so inadequate with its constant surge of sick and poor.

Your gift to the infant Jesus this Christmas will help St. Joseph start the building on its way UP. You won't let him down now, will you?

Hopefully yours,

Mother Anna Dengel, M. D.

Dear Mother Dengel

My Christmas gift is under way. Keep on the job.

[Signature]

[Date]