

## **MMS Response to COVID 19**

Our Medical Mission Sisters (MMS) are Associates are strictly following the order of staying at home to save lives. Some MMS who are even 90+ are doing what they can by stitching face masks in USA and few others are volunteering in the shelters when others are afraid to volunteer specially in Arizona area . In India, Philippines, Indonesia, the developing countries and USA MMS are raising funds and supporting the food and grain distribution. In Germany, London and Ethiopia MMS Doctors and Nurses are in the forefront treating the sick , helping the homeless and refugees . In Ghana and India MMS are preparing hand sanitizers and giving awareness to people as to how to protect themselves. MMS who are caring for the needs of refugees and homeless face deeper challenges. All are spending more time in prayer and reflection and connecting with one another . MMS Associate in Philadelphia Protestant Home where she resides is volunteering to be their guest blogger.

More details are below:

### **UK**

“Stay at home and save lives” is the urgent message from Prime Minister Boris Johnson, as from 24th March the UK entered into almost-total lockdown mode, with similar restrictions as in most of the rest of Europe:

Our younger members can still do limited work with refugees, trafficked women and the homeless, and frontline work in the NHS, and assist our senior sisters with shopping, etc

### **Simone Herrmann, a medical doctor in London writes..**

“Although general numbers of patients are still quite low, St Thomas Hospital is, like all other hospitals, seriously preparing for the expected increase in COVID-19 patients: every day we have extra training in intubation or how to look after ventilated patients and updates on the ever-changing guidelines. Reports from colleagues in other countries, such as Italy, help to guide us in all efforts. The beginning of the peak surge of patients is expected around Easter. We also have two emergency department consultants appointed for the wellbeing of our staff. We have already developed a new team spirit even beyond the specialties - we all have to up-skill and grow beyond our usual comfort zone of our specialty and good communication is essential. We are all sitting in the same boat, wanting the best care for our patients in this time of uncertainty of what we have to face. Many of you will know because you have been in similar challenging circumstances in various countries before.

Also there is a lot of lobbying for the homeless behind the scenes after the government published guidelines that were insufficient to protect the homeless and staff members who both are at high risk.

Reports came that homeless patients were discharged from Hospital or emergency dept. with the advice to self-isolate, but with nowhere to go other than a park bench or a crowded hostel and without access to day centers or food stores. The Pathway homeless charity wrote an open letter signed by several physicians and epidemiologists and the presidents of the Royal Colleges of Emergency Medicine and of Physicians to urge London's mayor, Sadiq Khan, NHSE and PHE London to provide shelter for the homeless. And it was successful! A contract with the Intercontinental Hotel was established and the group agreed to provide shelter. The help is coming slowly but steadily."

### **Roselinda And Jyoti Volunteers in Refugee and Homelss shelter writes:**

Linda Maog writes...

"Since the beginning of this week, the charities in which Linda and Jayshree have been involved have sent a memo of suspension of any volunteering work until further notice due to coronavirus outbreak.

However, the staff and some volunteers are now working from home due to strict compliance on social distancing with a potential vulnerable group of people.

Linda has agreed to work from home to give phone support to people detained in immigration detention centre and those people whom she had started supporting after release from detention centre through the JRS-UK post-detention project. She received a message about the current situation of immigration detention in the UK from Beatrice Grasso, JRS-UK Detention Outreach Manager: "These are difficult and unprecedented times and there is a lot of uncertainty, including about what will happen to people in detention. We are working with others in the sector on joint advocacy actions to ask for everyone in detention to be released to safe accommodation during the coronavirus outbreak, as removals are currently near impossible. There hasn't yet been an official reply to these asks, but we have heard from AVID (Association of Visitors in Detention) members all over the

UK that several people are being released from detention centres. The Welfare Manager at Heathrow has also told me that for the time being they won't be taking any new arrivals, so numbers in the centre are the lowest they've been in a very long time."

Caring for the needs of homeless people...

**Jyoti Kujur**, who works for the charity Help for Southall Street Homeless (HSSH),

shared that, although there were as yet no concrete plans of action in case there would be confirmed cases among homeless people, the Local Authority has allotted £3.2million for each local borough for homeless people affected by COVID-19. At this rate, there are only two staff and one volunteer left working regularly in the charity's night shelter, and the number of volunteers are going down due to strict compliance to health and safety regulations. Nevertheless, there are still a few volunteers who manage to bring food or deliver goods for their respective homeless shelter.

### **Dr. Maria Maria Goetzens writes from Frankfurt, Germany ...**

Our sisters and Associates in the medical field are working at the forefront, being in the laboratory, as a doctor, in the care of disabled people or in pastoral care in hospitals.

The homeless also suffer particularly from the situation. One of the only points of contact for them continues to be the outpatient clinic ESA in Frankfurt, which is kept open by MMS and Caritas.

“Carmen Speck, Karin Knötig and Maria Goetzens work together with ten other team members in the Elisabeth-Straßenambulanz, a surgery for homeless people in Frankfurt/Germany. As the older volunteers have to stay at home (because of their age and being members of the "risk group") the workload has become heavy for "the rest".

In order to offer medical treatment and care five days per week and to work with minimum risk of spreading the virus, daily work has changed a lot. So far no-one from the patients (100-120 per week) has tested positive, no-one has died and all team members are in good mood. It is a challenge to "fight" for appropriate shelter and accommodation for the sick and access to regular health service as well, if someone is not health-insured. Although rough sleepers are considered a "high-risk-group" they are less cared for and the Caritas health service in this small surgery is the only service for them in the city.

We feel highly supported by Caritas and younger volunteers as well as our MMS. Karin is still the only nurse for a large accommodation centre for almost 400 refugees. She tries to support them during these difficult times and to make them understand all restrictions and necessary hygiene-regulations.

### **Philippines: MMS during this pandemic**

Meetings followed one after another among lay staff as well as Sisters in Collantes. Compliance to subsequent directives issued by the government and dioceses affirmed the decisions made in those meetings such as the indefinite suspension of daily masses in our chapel, starting March 15, letting go of some staff to observe physical distancing, except for our health staff who were willing to stay on for one month. We organized ourselves and formed an inter-generational Kitchen Brigade of 6 sisters. Per quarantine guidelines, we designated only 2 persons for the 2

“households” in Collantes area who could be given a quarantine pass and be allowed to go out for food, medicines, banking and other essential needs. Young ones and seniors are prohibited from going out for any reason.

Having organized ourselves, we were able to turn to our wider community and tried to inquire where and how we could help out. The most immediate call was to provide food for the people especially those in the poor communities in our barangay (village) who are mostly daily wage earners. The “community quarantine” or lockdown in Metro Manila banned people from going out except those designated by the households. Even they who are allowed to go out on specific time slots and only for essentials had to go on foot or private vehicles since public transportation was banned from the roads.

Our first act was to donate to our barangay through the Parish. In coordination with our neighbours, the OMI Fathers, we responded to the appeal of our village leaders by committing to provide food for the security guards manning the gate in our village. We donated some goods to support a community of 35 Poor Claire nuns and their 3 resident priests; with masses cancelled all over the Philippines, even the offering of eggs to the monastery stopped!

Anticipating that this world-wide health crisis may extend beyond one month, the ULT decided to set-up a COVID-19 Emergency Fund. With this, we were able to respond to request for food assistance for urban poor communities in Metro Manila c/o a partner-organization. This fund enabled us to grant emergency financial assistance to all lay staff working for MMS in the different places of mission in the Unit.

In Bukidnon, we were able to coordinate through distance the distribution of rice and basic food items to 4 lumad communities in Quezon. Thanks to the generosity of our mission partners and the dedication of our “frontliners” who facilitated the distribution despite our physical absence in the area.

Our concern for the well-being and safety of our medical and health care workers in the frontline of this pandemic is gaining more and more attention. Even ordinary people are coming up with creative ways to produce PPE’s (personal protective equipment), give them a free ride or free shelter near the hospitals, or provide healthy food. Our newest response is once-weekly provision of Food for the Frontliners. MMS in Collantes of various age groups are committed to prepare and deliver every Saturday healthy snacks or a meal for the health staff in Lung Center of the Philippines in Quezon City. This government tertiary medical center has newly become a COVID-19 testing center, and accepts PUI’s (persons under investigation) and PUM’s (persons under monitoring).

## **India:**

The situation in Patna is getting tougher. It is reported that the doctors working at the main hospital where symptomatic persons were taken seem to have tested positive. This has scared health care professionals. More people are testing positive than we can care for. Untested positive persons may be infecting others so the cases are going up. Some of doctors and nurses general staff are on leave as they can not move out of the house due to lock down and transport to travel to hospital. We keep praying for healing in all the nations and in and around the hospital to be what we need to be in this challenging time.

**In our hospital at Patna** - they are busy making masks for all the patients and staff and patients relatives. The pharmacy had ordered 1000 bottles of sanitizers which got sold off in a day.

Bihar :

CORONA VIRUS Immediate action was taken to create awareness among poor and needy regarding prevention of corona through street play. From 18th March to 21st March 2020 A few village women and men – ranging from 18-50 years of age and dressed in vibrant yellow Kurta and sarees – shouting, singing and dancing in the villages these days. As their noise escalates, locals begin peering out their doors and through their curtains; quiet chatter breaks out among those on the street, as people watch the commotion that has erupted in the otherwise calm and quiet village. WE HAVE CREATED AWARENESS MORE THAN 3000 PEOPLE IN SLUMS AND VILLAGES OF VASISHALI DISTRICT Minutes later, swarms of locals begin making their way to the plastic tripol spread for their sitting. They gather in clusters and people begin encircling the stage filled with the 12 performers. For the next 30 minutes, more than 200 villagers are there to witness the something new that is very attractive. Adorned by gasps, laughter and thunderous rounds of applause, the community watches as the mix actors on stage illustrate the story of Corona, a dreaded disease that is just spreading all over the world. While the show is cushioned with jokes and soap opera-like scenes, unbeknownst to the community, they are engaged in critical impending danger from corona virus. Led under the banner of Swabhiman Sansthan the Kala Manch theatrical wing of the center has taken upon itself voluntarily to spread awareness among the mahadalit communities of rural villages of Vaishali District in and around Hajipur, the team has begun its campaign today before the Corona pandemic spreads. The play revolves around the care one must take these days to keep oneself safe from coming into contact of the Corona Virus through social contact, personal hygiene and other guidelines proposed by WHO. SMita Parmar Swabhiman Lok Seva Sanstha Hajipur , Bihar

**MMS in the South** are strictly following all the instructions given by our Government stopping all our gatherings and progrmmes. We are spending more time in prayer and planning to attend the Holy week on line celebrations, announced by our diocese. Some of us are participating the on line retreat from 5-12 April (Holy Week) with Jesus on his way to Calvary, in solidarity with

all who are in some ways or other, distressed by COVID-19. It is organized by the Jesuit Conference of South Asia.

### **Pakistan:**

The more touching part of Pakistan is that people have strong faith in God, and they have deep a spirituality. All the healing verses from the Holy Quran and from the Bible have been put on Facebook. People are remembering the time of Moses from Old Testament how those people were healed. In the Quran they talk about the "wazu" cleaning of all the openings of the body before prayer.

### **Ethiopia:**

As a rural primary hospital MMS are working on prevention. At the entrance of the hospital is a staffed "hand washing point." All who enter the compound have to wash their hands with liquid soap under running water. Daily health education is being given in the outpatient department, the maternity waiting house and for the relatives of the hospitalized patients. All patients are allowed only one relative to stay with them, to reduce the crowding on the ward. In the OPD we encourage the waiting patients to try to keep some distance but in the cause of the day it still becomes a bit crowded. What to do?

We are sewing face masks and the pharmacy is producing hand sanitizer. We encourage ourselves and our staff to wash hands frequently. As there are no known cases outside of Addis we are kind of hoping and waiting. All persons of all religions are vigorously praying. Long pages of prayers are circulating in all dialects and languages.

### **Ghana:**

Holy Family Hospital where I work as a Pharmacist has been producing its own hand sanitizer and liquid soap (for hand washing) for about two years now. And so we are blessed to have all the sanitizer we need. Understandably, consumption has more than doubled since the outbreak of COVID-19. Pharmacy is under a lot of pressure to produce enough. We have opened our doors to the general public and are selling to them, also to corporate bodies like banks and other health facilities.

At the hospital, we have formed a COVID-19 response Team which is leading the cause. Several measures are now in place. For example, OPD begins at 7am so that clients are attended to on time to avoid crowding. Entrance to the hospital has been limited to the main entrance and all people coming in (including staff) are screened; their temperature is checked and their hands sanitized with the hand sanitizer.

Personal Protective Equipment depending on our area of work and what is needed is available for all staff. Our Public Health Team is active with public education and sensitisation using all channels available.

As MMS here in Ghana, all our sisters in school are currently at home. Catherine our Unit Coordinator who recently returned from Germany on an official hospital trip is in self quarantine. As Head of Pharmacy in the hospital, I am personally leading the charge to ensure continuous production and supply of hand sanitizer. This means looking for the galenicals (raw materials) wherever they are and making them available for the Manufacturing Unit.

At our Medimis Pharmacy, we are also going all out to make sanitizers available. We get them at very expensive prices but to make it available is our priority. A 236ml which was sold at \$3 is now going to \$10! This is completely out of reach for many. We are in consultation (with the hospital but also the FDA) to buy directly from the hospital and put in small syrup bottles for distribution to the many poor. This we see as our preferential option for the poor.

At our Students hostel in Sunyani, the students are indoors because the University is closed. We have put a veronica bucket for hand washing. Medimis will send some hand sanitizers there in the course of the day.

### **Indonesia**

Until now, all of the Sisters are in good condition and healthy. The Sisters in Parepare cannot stay at home because they are involved in the hospital. Sisters in Semarang, Solo and Jakarta communities can stay at home because their involvement is not too closely linked to an institution. But overall, the policy to reduce social interaction also impacts some activities that need to be followed by the Sisters but are delayed or carried out online if possible. Sr. Anke was originally going to Singapore for a psychotherapy workshop but it was finally held online. The plan to celebrate the Feast of Annunciation, March 25, in the Solo community with sisters from the Semarang community for sharing input and reflections on geriatrics for senior sisters was also canceled. In addition, the price of masks and hand sanitizers are very expensive. Because of that many people make their own hand sanitizers, but it is not for sale. In some places, there were times when people who had a lot of money bought up food in supermarket for their own family supply in case there was a decision for lockdown. But until now, traditional markets and supermarkets, are still running so that the supply of basic needs is still relatively safe and easily obtained.

### **USA**

With the spread of the Corona Virus to the U.S. and our area life is being changed for all of us day by day. Since MMS in the U.S. are mostly seniors, ours is a population that is at high risk. Every morning we awake to new news of the spread and new measures that are being taken to try to stop the flow of the virus. In our area schools have been closed as well as many malls, gyms, museums, theaters, public places and yes, even churches. The Archdiocese of

Philadelphia has told people not to shake hands or hug at the Kiss of Peace, not to drink from the cup and has dispensed people from attending Sunday Mass. All around people are urged to practice “social distancing,” that is, not to stand or sit near others or at least six feet away. Signs everywhere encourage people to wash their hands and not touch their faces. Disinfecting surfaces has become a routine exercise. Many care facilities have gone into lockdown and are not allowing visitors to enter or residents to leave. Our own Shalom unit is restricting who can come. Seniors all over are told to stay at home and not go out if it is not urgent. The government has promised that grocery stores and gas stations will remain open, but many store shelves are empty and have long lines to get and pay for goods as people stock up in case they have to self-quarantine. As travel is being restricted those in the hospitality industry are heavily affected. Small businesses are suffering as well as those whose income depends on daily work and a paycheck.