

Women's Empowerment
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Number 42 - November, 2007

www.peacehost.net/Dorothy

Dear Friends,

We send you warmest greetings though we write with great sadness. Our hearts go out to friends and family in Southern California who are suffering from the terrible fires.

Here in Nicaragua, the Category 5 Hurricane Felix, and the two tropical storms that followed have left in their wakes:

- State of Disaster declared
- More than 55% of the national territory destroyed or severely damaged
- 216,000 persons affected
- 109 persons dead
- 135 missing
- 1,864 miles of roads destroyed
- More than 2,000,000 acres of rainforest ecosystems and habitats destroyed
- Most food crops destroyed

Felix entered the country at the North Atlantic Autonomous Region's capital, Bilwi (Puerto Cabezas), on the Caribbean Coast on September 4, cutting a 40 mile path with winds between 170 and 192 miles per hour. The two tropical storms that followed Felix struck the Pacific Coast of Nicaragua causing severe flooding and laying waste to homes, crops, bridges and roads.

These catastrophes came after the new government had committed all available resources to beginning the process of meeting the most urgent needs for health care, education and food production for the poorest Nicaraguans. There was minimal loss of life from the storms due to early government preparations before the hurricane struck.

President Ortega met with representatives of foreign governments asking for their help in raising \$400,000,000 to meet hurricane relief needs for the next six months for health, food, shelter and infrastructure so that farmers may return to produce food and children may return to schools. The President said that his government would seek to re-negotiate Nicaragua's internal debt to reduce interest rates and extend time-lines in order to free more monies for the victims of the severe weather. He also, stated that the fallen trees in the destroyed forests will not be sold but used for rebuilding.

"Women are not dying because of diseases we cannot treat. They are dying because societies have yet to make the decision that their lives are worth saving." ~ Prof Mahmoud Fathalia, Egypt

Thirteenth Annual End-of-Year Appeal

It is amazing what a difference it makes to have a government that cares about the health and welfare of its people. The spirit of hope and change is palpable in Mulukuku and Dorothy has new spring in her step and a smile on her face. This year has brought surgical teams from the

Ministry of Health to Mulukuku to do eye surgery and tubal ligation surgeries to prevent future pregnancies, a new laboratory technician for the clinic, a dentist, a food program for pregnant women, and hope for free medications.

In 2001, the President of the Republic closed the clinic and tried to chase Dorothy out of the country. In 2007, she was awarded the Ruben Darío Award, the country's highest honor, for her contribution to the health rights of poor women.

International recognition came in the form of the Global Health Council's award to the Maria Luisa Ortiz Cooperative and Dorothy of the Best Practices in Global Health award. Tremendous solidarity from the U.S. was manifested in the building of the Casa Materna, trainings in ultrasound and LEEP procedures for treatment of precancerous cervical lesions and the lifesaving gift of an ambulance. Medical residency rotations and other health care volunteers, the annual visit of the delegation from Galveston, and PINCC's (Prevention International No Cervical Cancer) visit to treat women with cervical dysplasia all raised the level of care in the community. The recent installation of a satellite internet system represents a leap forward in communication and information for staff at the MLO clinic.

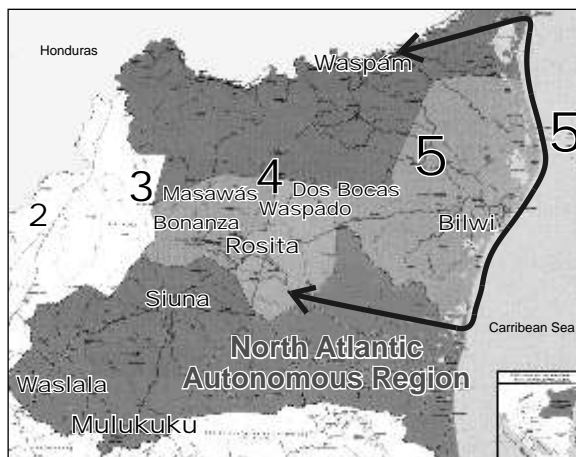
All this represents tremendous potential. But only potential.

The ambulance needs diesel and a driver. The lab tech needs a lab. The birthing room needs staffing and supplies and doctors to do deliveries. The brigades to the outlying communities need food, staff and medicines. The exam rooms need floors. The resources available to the clinic were stretched to the maximum and then Hurricane Felix hit the Atlantic Coast area, and people began coming into Mulukuku begging for help for communities stranded without shelter, food, water,

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Dr. Ben Winkes examines infant in Dos Bocas.



Path of Hurricane Felix through Nicaragua.
Numbers indicate hurricane category.

End-Of-Year Appeal, continued from page 1

or medicines. There are always more people to serve.

We again ask for your help to achieve this potential. We need your support to put diesel in the tank, both literally and figuratively. I have been volunteering in Mulukuku since 1999. The differences in the clinic over that time are astounding – solar power, clean water, a Nicaraguan doctor, a dentist, an operating room, a delivery room, the Casa Materna, and, now, the internet. But none of it functions without the support of our donors who pay for the doctors, medicines, driver, supplies, building, repairs, etc, etc. It is you who make it all possible. And for that, I thank you from the bottom of my heart.

Standing outside a house in Matagalpa the other day on my way back from Mulukuku, a woman walking up the street stopped to watch me admire the beauty of Nicaragua in front of me. She said, “My country is beautiful. My country is beautiful and there is room here for everyone.” She was inviting me to share her country with her, as the people of Mulukuku have been gracious enough to do. Please help us share the gifts that we as North Americans have in abundance with these generous people who share their country, their pride, and their hope for a healthier and more just world with us. Please help us realize that vision.

In Solidarity,
Connie Adler, President, Women’s Empowerment Network

Reflections by Noel Montoya

The people: Don Antonio Flores and Doña Lucrecia, their twelve children and fifty grandsons and granddaughters live on the side of the Kukalaya River in the municipality of Rosita, in the North Atlantic Autonomous Region. They are part of that large number of *mestizo campesinos* (“*españoles*” to the Miskito and Mayagna indigenous) that for years have been moving from western and central zones of the country to the jungle of this region, looking for young land to sow. Their lives are basically to produce their food, even though they dream of one day having enough resources to buy good clothes, send all their children to school and have sports supplies to play baseball.

The rainforest is the only option that a liberal economy and two decades of not existing in the national plans had left to these people. *Campesinos* like the Flores are villainous for some environmentalists. They are the first to get to the forests, before lumbermen (*madereros*) and cattle ranchers, to destroy by axe the enormous trees and make a space for their simple dwellings and their corn. (If not, the death by the hurricane could not be counted by hundreds, but *thousands*).

The wind threw away the forest, homes, and cultivations. In the tangle of fallen trees there is no meat to hunt and the paths have disappeared. The emergency help has serious difficulties to reach where it was difficult to reach before. If the people don’t sow soon, hunger threatens.

Hurricane Felix hit strongly the region’s nature. Near a million hectares of rainforest were destroyed, in a country where climate disorders and deforestation were already a problem. The surviving agriculture, the demand of wood, and *ganaderia* (cattle) make a big pressure on the regional rainforest. The effect on the climate by the disappearance of that mass of vegetation cover will be something to watch in the upcoming years, but there is an immediate worry, the possibilities of extensive fires in the next dry season by the enormous quantity of wood on the ground with danger for the people and the

definitive blow to the original vegetation.

An insidious effect on the people’s mentality also threatens to appear; if God destroys the jungle, we don’t have to preserve it.

Fauna also was devastated, first by the direct force of the winds, after, by the disappearing of habitats. Birds don’t fly nor sing on the dead trees, the surviving monkeys are concentrated on the bamboo that stand broken on the riverside. Tapirs, that normally walk alone, are forming groups to find some distant jungle.

Government response to the Emergency: The national army, the strongest institution of the country, was the first entity attending the area after the disaster, with its logistical and organizational capability. The search and rescue of victims, the transportation of provisions and medical assistance only was possible in some cases because of the use of its air force. The local and national governments set up their systems of attention to disasters. Help was sought inside and out of the country and it was transferred where it was possible. But the work is huge! According to the official resume 200,000 thousand people were affected; 65,000 acres of cultivated land and 50,000 head of cattle are lost. The reconstruction of dwellings will take years. For now, the urgency is to give each family a piece of plastic to protect them from the sun and the rain, some food and, if possible, seeds. Transportation is expensive, especially by the rivers. There have been created some distribution centers for donations, but the *campesinos* have to re-open with axes or power saws the paths to travel to the centers.

And now, the emergency has moved to other zones of the country, like Matagalpa with serious floods. The government has declared a situation of National Disaster, the attention moves to the new effected areas and, without doubt, this will reduce the possibilities of help to the people to the North Atlantic Region.

On a first trip to Rosita, Grethel (MLO Cooperative President) learned that aid was not reaching the most isolated communities. The media had talked about the disaster in the major cities like Bilwi and Sandy Bay, but nobody knew anything about the very rural areas of Rosita. Grethel was able to get a ride with an army helicopter for the health team of the Clinic to the community of Waspado. They found 70 families in a desperate situation; they gave medical assistance during three days.

The visit to a second remote community included two doctors from Seattle, Washington, Dinelle Pineda and Ben Winkes. Traveling up the river during the night was a whole existential experience. On the return, and having an extra afternoon, the team from Mulukuku offered medical care to the Miskitos from Kukalaya and the soldiers of the military command who shared the available potable water and offered their little bamboo and plastic cabin (all Five Stars) for the hammocks of the health team.

Solicitations came from other communities. We understand that the people need attention in health, but, also, company. They need the medicines, and, also, the friendly smiling and fraternal hug, the message of hope. They need to know that the disaster is not the will of God against them.

We want to continue our visits to the remote communities of Rosita where the hurricane struck all life. In Mulukukú (in 1988 Hurricane Joan destroyed the community) we were able to turn a disaster into an opportunity. We want the same for the people of Rosita.”

Reflections of volunteer Ben Winkes, MD

“We have an emergency,” announced Dorothy in the Casa de Voluntarios. Three weeks after Hurricane Felix, representatives of Dos tems hundreds of pairs of rubber boots (vital for living in the muddy



Health team on Kukalaya River.

Bocas, a community in the inland jungles of the RAAN, had come to the Cooperative to get help. We set out in 2 trucks. One truck was loaded with indispensable items hundreds of pairs of rubber boots (vital for living in the muddy jungle), 300 family-sized bottles with chlorine for water purification, a roll of plastic tarp, food and medications. The other truck was loaded with 11 intrepid souls (or those, like me, just pretending to be intrepid). We arrived in Dos Bocas unscathed, though tired, after about nine hours of rocky/dirt roads and a three hour boat trip up the river Kukalaya in the dark, illuminating the river's banks with flashlights to find our way.

When we woke in the morning to coffee prepared fresh over the host family's cooking fire, we got a better look at the surroundings. The settlement of Dos Bocas (named for the mouths of the two rivers that meet there) consisted of 10 or 15 homes scattered around a large clearing, with more homes back in the surrounding forest. The aftermath of Hurricane Felix, now almost a month previous, was obvious. The clearing should have been surrounded by a lush wall of green jungle, but that jungle was now a clutter of fallen tree limbs, with a scattering of still upright trees that had been whipped almost bare by the winds.

The community's health, always a delicate matter even under the best of situations, had taken a turn for the worse. With no clean water, diarrhea was ubiquitous; with increased exposure to the elements, skin infections abounded; malaria played its usual worrisome role. We managed to dispense a lot of medication (and most importantly, chlorine for purifying water.) The truth, though, is that Dos Bocas, even though it had been essentially ignored by relief efforts, was probably better off than even more isolated communities that lacked its cohesion. After Dos Bocas, we went downriver to the town of Kukalaya and worked with the largely Miskito community there (as well as the army post that unexpectedly provided us a place to sleep) and, finally, medications (and bodies) exhausted, we headed back to Mulukuku.

The MLO Cooperative provides an important, consistently present, bridge for marginalized people in northern Nicaragua and, even though this trip had seemed like an abrupt shift to a narrowing "emergency relief" focus, it actually grew out of the work done previously.

What is to come will be frightening- it isn't clear, for example, what the risk of forest fires will be in the coming dry season if the dead wood created by the hurricane inadvertently catches fire. Dos Bocas has already shown an extraordinary resilience, a resilience that we were to support, and to be inspired by."

Satellite Internet comes to Mulukuku

Communication between Mulukuku and the outside world took a great leap forward in September when Mike Rowland, a longtime friend of the clinic from Maine, set up an Internet connection for the clinic. Mike donated and shipped a satellite dish and modem which Mike and Byron from the clinic staff installed. We now have 24 hour high speed Internet access to obtain needed medical information and to utilize email and voice communication over Internet. Many thanks to Mike, Byron and all who were involved in making this happen!

Ministry of Health (MINSAs) and the Clinic

We and MINSAs have been working toward an agreement to better serve the health needs of the community. Finalizing the plan is delayed because of the crises. The Pathology Laboratory at the Regional Hospital in Matagalpa is performing all PAP and biopsy examinations without cost to us. The MINSAs has placed a dentist and laboratory Services will attend Clinic as well as MINSAs patients. MINSAs has also

technician with us. MINSAs is paying salaries and has promised laboratory supplies. We will provide the space, equipment and dental supplies. The Laboratory and Dental Services will attend Clinic as well as MINSAs patients. MINSAs has also promised to supply us with basic medicines, however, due to the critical needs of hurricane victims, this, also, is on hold. Before the hurricane struck, combined MINSAs and Clinic teams had begun taking regularly scheduled clinics to the countryside.

MINSAs special clinics, surgeries

After her visit to Mulukuku, the Minister of Health, Dr. Maritza Cuan, sent teams of physicians and surgeons to our Clinic to address some of the long-standing surgical and medical needs of the people. 35 eye surgeries were performed in our operating room for cataracts and pterygia; 15 tubal ligations in the birthing room on women who desired permanent sterilization; and consultations with specialists including pediatricians, an orthopedist, an internist, a urologist and gynecologists. Dozens of electro-cardiograms and ultrasound examinations were done. Gynecologists treated women for pre-cancerous cervical lesions with electro-cautery. These specialists generated referrals for a number of patients that are being sent to hospitals in Managua and Matagalpa. This was an immense effort by MINSAs and Clinic staff working far into the night for 4 days resulting in hundreds of patients being content and grateful for having their problems addressed. Following these visits, we took 15 additional patients for surgery to the National Eye Hospital. The visits of the MINSAs workers and the follow-up attention were tangible proof of the new government's commitment to the health of the people.



Preparing iron and mineral rich green-leaf extract.

Toward improving the people's diet

by Tamar Hemme, volunteer

The Nicaraguan diet is based on beans, rice, corn tortillas, and cuajada (fresh cheese). While this mixture includes protein, carbohydrates, fat, and some vitamins and minerals, there are many in the population who suffer from anemia and vitamin deficiencies. Because of our concern for the normal growth and development of our children, the Maria Luisa Ortiz Cooperative and Clinic invited SoyNica to teach us the importance of nutrition and new ways to include vitamins and minerals in our diets.

SoyNica is an organization with the goal of promoting food security by developing educational programs to generate change. They are focused on soy beans and their products and green-

leaf extract to promote better health. Soy beans are a source of complete protein that is rich in vitamins and minerals, and, with no cholesterol. Green-leaf extract is a simple way to add crucial B vitamins, Vitamin A, and Iron (among other minerals) to various foods.

Nereyda Gonzales from SoyNica taught sessions covering topics such as nutrition through the lifecycle and the nutritional benefits of soy beans and green-leaf extract. In addition, she led the group of Clinic Health Promoters and Community Health leaders in hands-on lessons in the kitchen to show us how to cook with soy in a way that is palatable. Finally, we learned how to make green-leaf extract that can be added to many different foods including jelly, honey, and juice. In a two-day whirlwind, we cooked up 20 recipes with soy beans and made two batches of green-leaf extract!

We plan to include soy in the diets of the women who stay at the Casa Materna in hopes that they will share this complete protein with their families. Also, we would like to provide more vitamins and minerals to children by producing and distributing green-leaf extract to families.

Clinic Report

Jan. - Sept. 2007

Women	3,988
Men	531
Adolescents	1,245
Children	1,689
Dental	406
Fam. Plan. First Visit	354
Fam. Plan. Follow-up	605
Pre-Natal First Visit	323
Pre-Natal Follow-up	447
Pap First	626
Pap Follow-up	991
Births	41
Malaria	139
Natural Medicine	516

Legal Office

Jan. - Sept. 2007

Cases attended	246
Include rape, 33	
Homicide, 4	
Family violence, 30	
Property disputes, 38	
Legal Counseling	1,574

Memorials and Honoring Gifts

- In Memory of Mary Ann Fiske from Elaine and Daniel Schwartz
- In Memory of Mary Ann Fiske from Susan Martinez. We will really miss her!
- In memory of Bill Doyle, lifetime activist, from Dorothy Doyle.
- In memory of my husband, Mike Bresnan, neurologist @CHMC from Alexa Bresnan
- In memory of John Brentlinger, friend to the clinic and the Nicaraguan people, who died March 6, 2007, from Ann Ferguson
- In honor of Connie Adler from Karin Anderson
- In honor of Paula Doyle's graduation from medical school. She has worked at the clinic and was quite inspired by Dorothy. From her loving mother Donna Doyle.
- In the name of Wally Eubanks from R. & C. Cox

Dear friends,

We again ask for your continued help for our on-going work to serve the people of Mulukuku, especially women in their struggle for life with dignity. Now, we ask you to give even more generously as we reach out to forgotten victims of the Hurricane who have lost all.

All strength to each of you in your work to care for this injured planet and all its creatures.

Abrazos from the Cooperative and Clinic,

Volunteers August-September-October

Name	Mulukuku	Departure	Job
Tamar Hemme	Aug 14	Nov 17	Nutritionist
Kate Debiec, MD	Sep 10	Oct 16	OB/GYN Resident 3rd yr. Swedish Hospital Seattle, WA
Pineda Dinelle, MD	Sep 15	Oct 15	Family Medicine Resident 3rd yr. Swedish Providence Program, Seattle, WA
Sloane & Ben Winkes, MD	Oct 3	Oct 27	Family Medicine Physicians Sea Mar, Seattle, WA

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Candida, an abused teenager, spent three months in refuge with us and gave birth in the clinic.