

## EDITOR'S NOTE

The novel that landed on top of my stack in December was *Little Bee* by Chris Cleave. It surfaced with fortuitous timing. *Little Bee* is a young Nigerian woman, barely beyond childhood, making her way to London in search of the Englishwoman who chopped off her own finger to save the girl's life during a cruel game.



MARY ANN  
STEINER

The details of *Little Bee's* history as victim of brutal regime change in her homeland, refugee in flight, exile in a distant country and pawn in surprising twists of fate and faith, I'll leave to curious readers. For me, the fictional tale helped balance the details of trafficking victims, health promoters, refugees with PTSD and clinic translators described in this, my first issue as editor of *Health Progress*, which is focused on immigrants.

I have been fortunate to work with authors who in these pages offer informed, compassionate, righteous, committed and innovative perspectives on what health care is (or isn't) being provided to people we call migrants, immigrants, refugees, displaced and victims of trafficking.

Sr. Ann Scholz, SSND, of the LCWR, recalls our Gospel roots in welcoming and caring for the stranger in our midst, while Antonio Cube, manager of the Justice for Immigrant initiative of the USCCB, provides an in-depth look at the ongoing advocacy of American bishops for ministry to immigrants and immigration reform. Together, the authors remind us that the legacy of the past and initiatives of the present demand a future with a reformed U.S. immigration policy.

There are challenges in caring for vulnerable people in transition. Kathleen Beavis, MD, used three case studies to show that a patient's personal story is both a gift to the clinician and the underpinning to care: a child adopted from overseas; a tuberculosis patient from an Asian country who traveled to a Chicago hospital, endangering the health of everyone around him; an adult refugee whose doctors unwittingly triggered memories of trauma in another country.

People in Catholic health care are as ingenious as they are dedicated. I was inspired by articles that highlight how entire communities of immigrants have benefited from innovative approaches to health and well-being.

Kirsten Walter describes a nutrition initiative of Catholic Charities in Lewiston, Maine, that focuses on community gardening and nutrition programs to transform low-income neighborhoods that are home to a migrant African group.

Innovative community partnerships can improve the health and uphold the dignity of immigrants. Care of the Dear Neighbor, described by Gabriela Robles, Verónica Gutiérrez and George Avila, relates the long-standing charism of the Sisters of St. Joseph of Orange being carried out in programs like *Paso a Paso*.

The most troubling collection of articles has to do with human trafficking and the high percentage of immigrants among trafficking victims. Catholic health care ministries as well as congregations of religious women, government agencies and others are intervening, advocating and voicing their rage. But as Nancy Mulvihill, Sr. Catherine O'Connor, CSB, MC Sullivan and Ron Soodalter all report, the victims are almost invisible and the crime is lucrative and low-risk.

Which brings me back to *Little Bee*. It may have been the book's cover that sparked my purchase — a black head in sharp silhouette, an outline of nose and lips, a trail of curls. There are no identifiable features, no recognizable face. Yet the faces of the people who figure in the articles that follow are very real: they have been etched in aching detail with the hope, age, fear, injury, shame, success and resilience that has shaped them. In each face we recognize the One who suffered and the One who heals.

I am especially grateful to my predecessor, Pamela Schaeffer, for several delightful weeks of orientation and a gracious handover of the high standard she set for this publication.

To those who have expressed kind wishes and affirmations of *Health Progress*, I thank you. I will be especially interested in your comments, suggestions and critiques of this and future issues. The stakes in Catholic health care are too high to miss the mark or tell less than the full story. I'd love to hear from you.

JOURNAL OF THE CATHOLIC HEALTH ASSOCIATION OF THE UNITED STATES

[www.chausa.org](http://www.chausa.org)

# HEALTH PROGRESS®

---

Reprinted from *Health Progress*, March-April 2014  
Copyright © 2014 by The Catholic Health Association of the United States

---