"Our story is not only the story of Catherine McAuley but of generations of women in whom Mercy has called forth a passionate and realistic response to the cry of the poor. Today the cries have assumed global proportions. We are being challenged to link with one another right across the world so that the Broken Heart of Mercy can enter more deeply into us and embrace God’s beloved poor." (Kath Burke rsm 1991)

When Deirdre phoned and asked me to make a presentation at the Bridging the Gap Programme 2009 - my first thought was how to find a gap in my diary - as I was already committed to travelling to Vatican at the end of September to represent the Bishops Conference of England and Wales at the “First European Conference on the People of the Street” and Geneva at the end of October to attend the NGO Conference to preparation for Beijing +15. Which is a lot of travelling, considering that I am the full time director of women@thewell (a charity in London that provides services to vulnerable women). However when I reflected on it, I began to realise that in essence this is what bridging the gap between policy and practice is - finding spaces in busy diaries and being willing and able to make the connections between the policy makers and those who’s lives are affected by the implementation of those policies. This was therefore the premise from which I began the preparation of my presentation, with a particular focus on the intersections with MERCY!

I took the example of how the Charity I work with had come into being as a result of I guess its no surprise that I return to Catherine in order to explore how one particular expression of our Mercy charism that was her legacy to us, I bridging the gap between policy and practice in one particular place today. Catherine McAuley had a vision for the poor street women of Dublin in the 1820’s.

- it was not enough simply to provide shelter and advice.
- in order for the women to break free from the abuses common in her day, they needed more
  - education,
  - possibilities to learn new skills,
  - sense of their own dignity.

Catherine didn’t set out to be a “nun”. She only wanted to gather a few people around her to help poor women. To achieve this she built the first house of Mercy in Baggot Street, Dublin. However, the church had other ideas...but we can see from her vow formula she didn’t let go of her vision of improving the lives of poor women. Her House of Mercy was a “One Stop Shop” for women who needed a “hand up” not “a hand out”. It was something new. Following in this Mercy tradition, women@thewell is the “something new” for today. The refurbished building to make this work possible and the first three years funding have been provided by Mercy.

women@thewell is an innovative new charity, founded to provide a uniquely holistic and multi-faceted range of services to vulnerable women caught in multiple cycles of abuse and social exclusion, equipping them with the skills, resources and support that they need, to successfully rejoin society. We target our services toward women involved in pavement culture, specifically those who are sexually exploited through their involvement in prostitution. Additionally we seek to respond to the needs of women who have experienced trafficking. Women, caught up in the many facets of pavement culture (homelessness, prostitution, drugs, alcohol, violence, physical and mental ill health), are often kept locked into chaos by the complexity of services. Many people may be working with them on specialist issues, but nothing ever seems to come together at the right time so they can get their lives sorted out. Moving from ‘chaos’ to ‘stabilisation’ is an important shift and one which is often brought about...
by a particular "crisis" such as an extremely violent attack, an overdose, miscarriage, children into being taken into care, or an HIV/AIDS diagnosis. Exiting a chaotic lifestyle is a long and complex process, which is not linear. Women may move in and out of chaos many times before finally sustaining a changed lifestyle.

It can be very difficult for women to restructure their everyday lives and move on. It takes determination and courage to step away from the familiar, having to exclude people who were friends in order not to be sucked back into the chaos. Further difficulties arise as women begin to work with the lasting effects of the violence and abuse they may have experienced. In addition, frustration with finding appropriate training opportunities, employment or even unpaid work experience in a supportive environment may make a woman feel discouraged and that all the doors are closed to her.

women@thewell operates a needs led proactive approach to providing services. We have successfully managed to enable women with long term histories of street activity to obtain and maintain accommodation, often through paying for bed and breakfast hotels to bridge the gap until benefits and drugs scripts can be sorted out and other more appropriate accommodation becomes available. This has proved to be very effective for women who have a long history of street homelessness, those who have been living in crack houses and those being released from prison to the streets. We actively work with women who are either currently the subjects of Anti Social Behaviour Orders (ASBOs) or Acceptable Behaviour Agreements (ABAs) and whose behaviour is seen to be putting them at risk of becoming subject to such orders. We endeavour to enable them to access the appropriate support and services they need to ensure that rehabilitation is possible and these orders cease to be necessary paying particular attention to diverting them from prison.

Throughout these processes of change the women meet many barriers and hurdles not least the legal situation of prostitution in the UK and the social stigma attached to the label. Much of the work we do is in the first instance to get legal representation for the women on an individual level to challenge negative decisions that impact on their lives. Beyond that we network and lobby at National, European and International levels to effect legislation that will negatively impact on the lives of women. We sit on national governmental advisory groups and actively involve our women in consultations that affect them to ensure that their voices have maximum impact with policy makers and policy implementers. We are currently part of the Women's National Commissions working group that is looking at women's safety and the Olympics and we link the information back from that to Church organisations. At all times as an organisation in partnership with Mercy, we try to ensure that we work to bridge the gap between policy and practice.

If we look again at wider context of Mercy, namely the Memorandum of Association of Mercy International Association we see that it was established to:

“To stimulate and inspire Sisters of Mercy, their associates and colleagues in ministry, to continue the work of Catherine McAuley, Foundress of the Sisters of Mercy, in ways which are both creative and appropriate to the needs of the world for the time being” and “to respond to the cry of the poor”.

This clearly recognises that over the years our focus as Mercy has been moving beyond our own back yard – from local snap shot to the bigger picture – from a “sticking plaster” on an individual’s wound to systemic change to prevent that same wound happening to anyone else – be that in the wider local area, the nation state or the global village “earth”! Traditionally our strength has been in being totally immersed in a local area, with sisters knowing and being known by generations of families, through schools, hospitals, parishes and home visiting. In fact Catherine’s foresight in sending sisters out from Baggot Street to respond to need in new arenas and allowing them to make the decisions regarding local needs was at the time revolutionary.

“Reflecting her belief that grinding poverty was God’s plan for no one, Catherine’s desire to serve the poor explains why she ...insisted that her Sisters of Mercy not be confined by cloister or convent walls.”(Denis Horton. New Zealand. September 2008)
However with the advent of modern travel and systems of communication, the world has shrunk, for the both society and us. The impact of decisions and policy making from national as well as international levels can have huge impact (both positive and negative) on people's lives. Throughout the presentations we were given evidence of gaps and many examples of “Mercy” bridging them. We were privileged to share stories of Mercy women seeing beyond immediate local need, by being “called” to respond to the plight of the poor in far off shores. As Mercy women following in the tradition of Catherine McAuley it is evident that we can never be mere spectators, we are called to be active participants in the global movement to continue the works of mercy in ways that are creative and appropriate to the needs of today's globally aware society.

A clear example of this was given on the final day when Dr Karen Schneider rsm shared with us a challenging and moving presentation on how she as a doctor is bridging a huge gap in our world by bringing young trainee doctors to various parts of the world - Haiti, Peru, Guyana, to address health issues within the indigenous communities. Karen travels with a team of experienced doctors, nurses and volunteers, some twenty people in all, among them pediatric residents at Johns Hopkins University in Baltimore where she works as a practitioner and assistant professor of pediatric emergency medicine. These trips abroad have been so successful that they are now part of medical school's course work. As well as taking part in these expeditions, Karen spends much time behind the scenes networking and fundraising to make the trips possible, as the people can't pay for the treatment. The medications brought to the country are purchased through the generous donations of benefactors, while additional solicited money helps to finance laboratory testing, diagnostic imaging and surgeries.

"Catherine's genius for enlisting the wealthy to work with the poor in transforming society remains a key strategy as we seek to align Mercy's mission to the needs of our time." (Denis Horton. New Zealand. July 2008)

Karen described a few particularly moving cases, including a three-year-old boy, born with club feet and who had never seen a doctor in his life. He walked on the sides of his feet, causing bulbous calluses. His parents borrowed the 12 soles (roughly four American dollars) necessary to travel from their home in a distant village to the mission where Karen had set up a clinic. The couple hoped that somehow, someway, someone in the group might be able to repair their boy's feet. They were very conscious that to survive in later life he would need to be fully mobile. Karen, who sees so many desperate cases in the countries she visits, selected this child because, she said, she had witnessed the impact on later life of this kind of neglect: e.g. a woman whose club feet led her to walk the way the young boy did who in time she lost her small toe, then the others, from the constant scraping, she had to survive by begging as she was unable to work.

"Today, Sisters of Mercy, through Mercy International Association, use their resources to respond to issues of global poverty demonstrated in the massive displacement of persons worldwide." (MIA Vision Statement 2007).

The young boy’s mother, had a two-month-old daughter at her breast and six-year-old daughter at her side, trembled and wept when Karen told her that money from the United States would pay for the surgery needed to reform her son's feet. The boy’s father’s eyes filled with tears as he expressed his overwhelming gratitude to those who had made this happen. He owned no land but served as a day laborer for those who did, earning about eight to ten soles a day. Karen went on to tell the parents that the operation would take place in a hospital in Piura at the hands of an excellent orthopedic surgeon. The boy's mother asked “Is this really going to happen?” as she could not comprehend the possibility and Karen was able to reassure her that all would be arranged and that by Christmas her little boy would be walking normally! As the news of the promised, fully funded operation sank in, the parents became quiet, amazement shining in their eyes. Karen told us that the possibility of bringing this kind of joy has motivated her to bring medical care to the needy on thirty expeditions to Haiti, Guyana, Uganda, the Dominican Republic and Peru.

Many questions arose for me during the course of the days. How do we identify the gaps desperately needing to be bridged by Mercy today? How can we connect more effectively to bridge those gaps? The challenge to us in
en-fleshing the MIA Memorandum of Association seems to be to continue to identify and respond to local need whilst at the same time ensuring that systemic change is also possible, this is defined by MIA as follows:

**The Purpose of the Association is:**
- To foster unity of mind and heart among Sisters of Mercy and to increase awareness and experience of their global interdependence.
- To facilitate collaboration among the Congregations, Institutes and Federations to meet the needs of today and to work for justice.
- To encourage and nurture the flourishing of the Mercy charism within the various cultures of the world.

MIA has made it possible for global collaboration to take place, for us to work collectively outside of the boundaries of own backyards, beyond the limitations of local community, congregational or indeed national boundaries thus making visible both new concerns of people in need and new and creative possibilities for mercy responding to those needs through collaboration, networking and partnership. As Mercy women today we are challenged to find ways in which our ministry networks and resources can be put at the service of need, Expanding Mercy International Centre to include the Catherine McAuley Centre, and creatively using our collective international resources we will be enabled to en-flesh the MIA Vision Statement 2007 and "respond to issues of global poverty demonstrated in the massive displacement of persons worldwide". Baggot Street, this is further facilitated through the other structures and networks put in place by MIA including MGC and the Mercy World website and communication systems both of which enable increased collaboration in global projects, indeed the virtual Mercy community gives a contemporary expression of Mercy alive on www.mercyworld.org, MIA’s website. Through this medium rapid communication of disaster is possible and a voice for those in need, which enables their stories to be told world wide and so put some of the building blocks together to enable sustainable systemic change.

'Ve Sisters of Mercy in the twenty-first century are in radical communion beyond all borders. We are grounded in the compassion of God. We are nurtured by the Gospel, and by the story of Catherine McAuley and of Mercy lived and living. Aware of our own brokenness, we join with others in healing the wounds of Earth and Earth’s peoples.' (International Mercy Research Conference Statement 2007).

Finally, I return again to Catherine who exhorted us to keep on keeping on, because as Sisters of Mercy......

**We can never say "it is enough".**

*Catherine McAuley - Familiar Instructions, p. 2*

Lynda Dearlove rsm
IOLM - UK