Community Health Care Still A Priority
Lillian Hall, Managua Coordinator

Free health care was available to all people during the 1980’s when the Sandinista Front for National Liberation governed Nicaragua. This was a major feat for a small, impoverished country embroiled in a war which consumed 60% of the national budget. Despite the fact that for many years during the war, there was no national budget for health care, international aid given to the government was channeled into the health sector. Amazingly, everyone had access to free medical procedures and medicine. Massive vaccination campaigns prevented diseases such as measles and polio.

After the Sandinistas lost the elections in 1990, health care became partially privatized. While one could still technically visit a health center for free, there were no medicines, often no equipment for tests and x-rays. Patients were even forced to buy a surgical packet, everything from the sutures to bandages, before having any necessary surgery.

During the sixteen years of neo-liberalism, which focused on minimizing government services such as health care, the majority of Nicaraguans simply had no access to adequate health care. People died because they lacked money to buy surgical packets or to make necessary trips into major cities for surgery or chemotherapy.

Have things changed?
In November 2006 the Sandinista Party won national elections with 38% of the vote. One of the first presidential decrees by incoming president Daniel Ortega provided free health care and education. These decrees were received with almost universal support and made people reminiscent of the 1980s when everyone, no matter how poor, had access to free health care and education. Upon hearing the decrees, people had high expectations that in these areas, at least, their lives would improve. Almost a year later, what has really happened?

Sadly, not much.
The Nicaraguan health system is in shambles. Hospitals and health centers are dilapidated, over-crowded, and poorly equipped. Doctors and nurses receive low salaries, work long hours, and are therefore unmotivated. Medicines are unavailable. Just as before, people are diagnosed, handed a prescription and instructed to buy their medicines in a private pharmacy. Medicines are expensive and not within the reach of the average Nicaraguan living on less than $2 dollars a day. Thus, “free” health care is still a luxury.

The Casa de los Niños is an excellent example of a community-based health project hosting a natural medicine pharmacy, a medicinal plant garden, educational workshops, and information on health rights.
Doña Margarita, founder

see Priority page 3
News from Nicaragua
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ProNica, Incorporated is a 501(c)(3) tax exempt corporation under the spiritual care of the Southeastern Yearly Meeting, Religious Society of Friends (Quakers) with offices in St. Petersburg, Florida and in Managua, Nicaragua where it is a registered Non-Governmental Organization (NGO).

ProNica’s Mission is to assist in creating and sustaining programs by and for the Nicaraguan people, recognizing that these need to be self-help projects initiated by Nicaraguans which hold promise for grassroots growth, arise from Nicaraguan needs and tradition, and provide not only survival but also empowerment.

ProNica’s priorities are community cohesiveness and economic development, training in non-violent procedures, health, education, agriculture and women’s empowerment. We seek to link in solidarity Nicaraguan people with concerned individuals internationally to promote understanding and mutual action. Education of those, both in the U.S. and Nicaragua who seek information or to be of service, is part of our mission.

ProNica’s work is accomplished by an international core of dedicated volunteers who seek to embody Quaker principles of consensual decision making and action and respect for that of God in every person. This effort arose out of a deep concern over the international exploitation of the Nicaraguan people and resources and a wish to respond to that concern in practical and constructive ways.

To foster intercultural exchange and solidarity, ProNica maintains an administrative office and a resource center (Quaker House) to provide hospitality to volunteers and travelers wishing to learn more about Nicaragua. Educating these interested people and their subsequent education of fellow North Americans furthers these goals. Quaker House is a place of Worship, a resource center, and a gathering place for volunteers.

My Corner
by Barbara Mahal
Committee Co-Clerk

I deeply appreciate our volunteers in Nicaragua. We have had as many as four volunteers at one time. We accept volunteers from 18 to a healthy 70 years of age. Volunteers submit an application and three references for the volunteer committee to make a decision.

Based on volunteer interest and skills and the needs of our project partners, Lillian Hall determines the best placement that benefits both. Even though volunteers must speak Spanish, we recommend they attend a Spanish school for at least a few weeks to pick up local dialect. Volunteers stay with host families within the community and usually pay $200 or $300 a month. Nicaraguan people are generous and warm-hearted. The experience in Nicaragua can be a turning point in many a volunteer’s life. If you are interested, contact the stateside office.

Hasta la Vista

ProNica DVD

This DVD documents our various projects in Nicaragua.

Australian filmmakers Alicia Ford and Nathaniel Wills, created a 15-minute segment about our project partners. Carl Hersh created a 2-minute segment about the Acahualinca beauty school that retraining former sex workers in a healthy, marketable skill.

Send $10 to ProNica stateside office.

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Certain surgeries, such as tubal ligations, are considered elective and therefore a last priority. Hospitals struggle to attend to those women who need life-saving surgeries, such as hysterectomies in the case of cancer. The criminalization of therapeutic abortion, supported by all the political parties including the Sandinistas, has led to the death of women with complications in their pregnancies. Doctors fear attending to women with miscarriages for fear that they be accused of performing an abortion and be sent to prison.

Human Rights Watch, an international advocacy group, conducted an extensive study of the implications of penalizing therapeutic abortion and considers that Nicaragua is violating the rights of women. Therapeutic abortion had been available for over a century in the cases of congenital birth defects, rape, incest, and when the mother’s life was in danger. One week prior to the 2006 national elections it was penalized despite protests from women’s organizations, human rights groups, and medical professionals.

Therefore, ProNica-supported community health projects are more important than ever. Projects such as Mama Licha’s Clinic, the Acahualinca Women’s Center, the Achiapa Natural Medicine and Acupuncture Clinic, the Casa Materna and the Casa de los Niños continue to provide life-saving health services and education to the people of their communities.

Mama Licha in Esteli is just one example. Alicia del Carmen Huete, affectionately known as Mama Licha, was a nurse midwife for the national ministry of health for thirty years. When told she would have to retire, she was at a loss. She had helped women all her life; retiring to a life of TV watching was simply not an option. Soon after being sent home, women started appearing on her doorstep. Her home became a de facto health center for poor, pregnant women. When a couple of Yale midwifery students studying Spanish in Esteli discovered her, they raised funds to build a two-room clinic in Mama’s back patio. As ProNica learned of her work, we joined Mama’s other supporters.

Last year ProNica awarded Mama Licha an initial $1,000 dollars for pap smears and tubal ligations. One hundred women, of whom thirty-five had never had a pap smear, received this free service. Of these, a shocking 80% had some abnormality or infection. Forty of these women then required either biopsies or colposcopies. Of the forty, seven had incipient cancer and another three already had in situ cancer and needed immediate intervention. The others “merely” had dysplasia, severe inflammation, atrophy or chronic cervicitis.

While the biopsies and colposcopies were provided free of charge at Mama Licha’s, at a private clinic this would have cost around $75 dollars, which is around the monthly salary of a domestic worker. For the 80% of Nicaraguans who live on less than $2 dollars a day, one can see that having to pay for health care forces women to choose between food for their families or their own health. Their health is always last priority.

Mama Licha also provides informative workshops and presentations to a variety of groups. One important group is adolescent girls as 49% young women become pregnant before age 19. This is a vital but difficult task in a country where the power of the Catholic Church and machismo influence women’s and girls’ abilities to make decisions about their own bodies and lives.

The Sandinista government is only a year into its administration and people continue to hope that their lives will improve, especially in the areas of health and education. Rebuilding a run-down infrastructure and revamping the entire health system is no easy task given limited government resources. Add the recent natural disasters and the scenario looks even more sobering. Therefore, community, non-governmental health centers are needed more than ever.

ProNica welcomes new Quaker House Caretaker Brynne Keith-Jennings. Formerly with Witness for Peace, Brynne lead delegations to educate US citizens about the impact the US had on Nicaragua and some of the daily challenges Nicaraguans face.

Welcome, Brynne.
On September 4, while Managua experienced heavier than usual rains, people on the Caribbean Coast suffered the devastation of this category 5 hurricane. Twelve hours of torrential rain and 260 mph winds swept away 133 lives – lost at sea. Months later, 65 people are still missing. According to the governor of the Northern Atlantic Autonomous Region (RAAN), Reinaldo Francis, “it’s possible that we’ll never know how many people were killed.” Some estimates are closer to 300. Over 20,000 homes were damaged, half of those beyond repair. The number directly affected by the hurricane, either by damage to personal property, infrastructure and food supply, or sustaining injuries, is estimated at 188,726 people.

These staggering figures only reveal a small portion of the long-term damage in one of Nicaragua’s most vulnerable areas. Roadways were destroyed – further isolating many communities who are already days away from other communities. Over 11,000 wells and 13,000 latrines were destroyed – depriving access to potable water and sanitation. Schools, churches, and community centers were blown away – depriving communities of institutions that promote development.

The most dangerous destruction was what happened at the roots, literally. Over 40,000 acres of crops were destroyed. Fruit trees were uprooted. Areas of the ocean were polluted, preventing fishing. Due to these losses the majority of the population is temporarily dependent on outside food sources. These sources face obstacles of transportation; many need to be flown in by helicopter. Accion Medica Cristiana (AMC), a series of community and health centers throughout RAAN, reports that relief efforts simply have not been able to provide enough food to meet needs.

The Atlantic Coast is culturally, ethnically, historically, and socio-economically distinct from the rest of Nicaragua. Poverty rates are higher. Vulnerable communities are desperate, unstable, and impoverished. With little income to supplement a diet from uneven fishing and crop harvests, malnutrition was extremely high even before the hurricane. More than 50% of the population of Waspan, a community in RAAN, were either at risk or suffering from malnutrition according to a 2006 study; 13.9% were in a state of severe malnutrition.

With few roads connected to the larger metropolitan areas of the Atlantic Coast or the Pacific Coast, communities were already isolated. The population density of the area is 9.5 inhabitants per square kilometer, compared to the average in Nicaragua of 43 inhabitants per square kilometer. Although the autonomous regions make up 26.5% of Nicaragua’s land, they only make up 10% of road infrastructure in Nicaragua. Approximately 62% of the roads are in bad shape. This area is also isolated by lack of access to communication. Only 1% of homes have phone lines, compared to the national average of 12.6%.

International and national relief efforts were quick and efficient, but limited. Only sustained efforts to rebuild will help the Coast return to relative economic security. In the days following the crisis, donations flowed into Nicaragua, some from governments, and many more through non-governmental organizations, churches, and humanitarian agencies. These donations shipped food and potable water and began the rebuilding of houses, wells, latrines, schools, health clinics, and replanting crops. While many relief efforts focus on guaranteeing survival for communities in the immediate aftermath of the hurricane, organizations such as AMC with a long-term presence and continued work for sustainable development, are vital.

Sadly, shortly after the hurricane, another disaster struck: massive crop loss. Torrential rains flooded areas of the north where much of the nation’s food is produced. This caused a sharp increase in the cost of basics, such as rice, beans, and dairy products. Prices were already rising due to increasing petroleum prices. The Food and Agriculture Organization of the UN representative in Nicaragua, Laura de Clementi, stated these natural phenomena have resulted in the loss of over 260,000 acres of rice, corn, and beans crops. She warned that an investment of $3 million in new seeds are needed to avoid a famine next year. In October, President Daniel Ortega declared a state of emergency.
Nicaragua will need continued investment not only to rebuild homes destroyed by the hurricane and flooding, but also to ensure that crops are replanted, fishing equipment is replaced, and roads are repaired to renew the fragile food delivery system.

To donate directly to Accion Medica Cristiana, visit www.amc.org.ni. ProNica also accepts donations for hurricane relief. Just note in your check memo line and your tax-deductible donation will be forwarded to AMC.

Reproductive Choices
Brynne Keith-Jennings, Quaker House Caretaker

Many of us in the developed world enjoy the right to have as many, or as few children as we want, when we want. This is not so for many women throughout the world. For Nicaraguan women living in extreme poverty, having a large family represents economic hardship and constant struggle. These poor women are condemned by their society to be the primary caretakers bearing the brunt of maintenance of their families on inadequate incomes.

The Acahualinca Women’s Center is a community-based center that provides health care and wellness for women. Theirs is a holistic approach to empower women. They offer several birth control methods at reduced cost and provide informative talks on reproductive health.

One essential and often-overlooked service with enormous impact is tubal ligation surgery. Commonly referred to as “getting one’s tubes tied,” this surgery cuts, ties or seals the fallopian tubes, effectively preventing pregnancy. The Center also provides vasectomy surgery for men. According to Silvia Cisneros, Nurse at the Women’s Clinic, in the past five years, about 220 people have chosen permanent surgery. The majority were women; eight men opted for vasectomy.

The Clinic offers the surgeries free, which is no small feat in the community of Acahualinca and the surrounding areas, including the municipal dump. Along with the surgery, the Clinic provides consultations, informative talks to prepare patients for surgery and recommendations about risk and care, medicines, and post-operation consultations. The Clinic provides these surgeries to women and men at least twenty-five years old and with at least two children.

Private hospitals also offer these surgeries for a hefty price, and while public hospitals provide the service for free, they are reserved for emergency situations and severe health complications. Thus, with a years-long waiting list, it is almost impossible for women to choose this elective surgery. These limitations usually scare away potential clients. The Clinic also provides an extensive outreach program. Community health promoters give regular talks, identifying candidates for surgery, often introducing the option. For the women and men of the nearby communities, the Clinic has made a tremendous difference.

Patients who opt for the surgery acknowledge one universal refrain: within the current economic situation, more children increase the burden of raising a family.

Raul Pabón, a 28-year old resident of Acahualinca, decided to have a vasectomy after the birth of his second child. Raul says, “For me, growing up, I never had any kind of stability. My mother was a single mother, and we would sometimes have to work with her in order to eat. My dream is to be able to provide everything I can for my children. I own a small sewing business. I don’t make a lot of money, but enough to take care of my family’s basic needs. I want to give my children everything I can. I know that if I had more children, there wouldn’t be enough to give them all everything.”

Gloria Artola Lopez, a 28-year old woman with hazel eyes and a round face, said that she came to her decision after seeing many friends, neighbors, and family members struggle with so many children. “I knew since I was young that I only wanted two children,” she states. “I saw my neighbors and friends who had 4, 5, or 6 children, and I thought, these women can’t even make it on their own, let alone provide for all of those children! I saw how much they suffered from the economic situation, and I didn’t want that. After I had two children, I decided that I wanted the operation, and I came to the Clinic.”

The women I interviewed all felt that society considered women the primary caretakers, thus implicating that despite there being two parents in a relationship, and no matter how much each partner contributed economically, the woman was usually who performs most child care duties, such as feeding, bathing, and dressing the children. If their partners left, caretaking would fall completely on their shoulders.

Brenda Liz Rolloz Madrigal, 29, cooks for the Los Quinchos program in the dump.
She birthed seven children, three of whom are deceased. When she and her husband fought, he would often leave, sometimes for months. She assumed complete responsibility for their four children. “I would sometimes have to start going to the streets, selling everything I could, working day and night, while who knows where he was, maybe drinking with his friends. He didn’t want me to get the operation, but I wanted to so I wouldn’t have to go through that again. Since I’m the one caring for the children, I think it should be my decision.”

Raul reports that many men feel that having children with different women gives them a sense of pride and accomplishment. Raul disagrees. “I think it’s unfair to have a child with a woman and then disappear, as many men here do. The child grows up not even knowing its father. I know, because my father was a womanizer, and he left my mother alone to raise all of us by herself. I suffered because of that, and I knew that I wanted to have my family, my wife and children, and not run around like he did.”

In that sense, the operation is liberating. The worry of pregnancy is eliminated. Brenda states that many women need more advice, maybe from older women, education about contraception and their rights. “I didn’t have anyone who gave me that kind of advice,” she says, looking off into the distance. “I had my first six children at home, the first at age 15. The last one I had in the hospital. It wasn’t until then that they told me that I could use birth control; that I could prevent pregnancy. I had never heard that before.” She began using contraceptives, and when she heard that the Clinic was offering the free surgery, she was interested right away. “If I could go back in time, I wouldn’t have had so many children,” she says. “It only makes life difficult. Everything is always getting more expensive. The price of beans is always rising, the price of rice, too. Everything I earn I have to spend on my children. If I didn’t work, I wouldn’t survive. Soon I won’t be able to survive regardless, everything is so expensive.”

Francis Abregos Martinez, 26, thinks that women wouldn’t have so many children if they were better informed of contraceptive methods. From within her municipal dump home, a structure assembled from pieces of zinc, cardboard, and wood, she states, “I don’t think that most of the girls here have children because they want to, but rather because they don’t know how to protect themselves, or maybe they forget to take a pill or use a condom, and they end up pregnant. Take my neighbor; she’s seventeen and pregnant with her third child. She already wants to get an operation, but she has to wait, I think, ten years more. How many more children is she going to have in those many years?” Francis, who raises pigs and chickens and collects trash in the dump with her husband, says that “for us, the decision was very easy. We have four children, and it is already very difficult. Why would we want more?”

The decision relieves the burden of family planning, and allows them to focus on providing for their children’s future. As Francis states, “I grew up in the dump and collected trash from a very young age. None of my children have to work collecting trash, and my dream is that they go to school so that they no longer need to live in this place [the dump] and can have a more dignified job.”

Brenda states that her dream is to have her own house with her children. “Right now I live with my mother, and there’re always so many people in the house. I know I am better off than many women, since I no longer live in the dump. But my dream is to be able to live alone with my children, and be able to raise them how I like.”

As people like Raul, Gloria, Brenda, and Francis get these operations, they’ve found that it opened the way for talks with other community members about the reproductive choices they make. Gloria states, “A lot of my female friends have asked me about it, wanting it themselves. They say they’re afraid of getting surgery. I tell them that it’s safe and how to get to the Clinic. I also tell them that if they don’t want surgery, there are other options.”

Raul says he has to dispel many myths that his male friends have about surgery, including that it will lead to a loss of pleasure or sexual drive. With a sheepish smile, he says, “I tell them that those things aren’t true, nothing’s changed, and that they should think about doing it, too, especially those who already have lots of children!”

Thanks to ProNica, the sole donor in support of the operations, residents of the dump and the surrounding areas now have another option, granting them more control over their destiny and allowing them to focus on the children they have and the dreams they are pursuing. 

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Choices from page 5

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The life I touch for good or ill will touch another life, and that in turn another, until who knows where the trembling stops or in what far place my touch will be felt.

Fredrick Buechner

$75 provides a tubal ligation surgery for a poor woman who wants to limit the number of her children.

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Roughing It
Sarah Abigail Steinback

For an intense six-week trek through western Nicaragua, ten University of Florida students began our journey with ProNica. The first week, we stayed in ProNica-operated Quaker House in Managua.

There, we lived very well with comfortable beds, pillows, showers, a washing machine, clean water, a sturdy roof, and plentiful meals - all in a safe enclosure of window bars and locked doors. The poverty in the city came in the form of children or a dirt-covered man selling items on street corners. Although, we were living in relative comfort, many of us called Quaker House, “roughing it.”

The second week we left the city. One evening in Achuapa, we stayed in a dorm called El Bloque with rickety bunk beds and muddy well water for showers. The next few nights we visited an—even-more-rural community called Matapalos and stayed with families in their homes. Here we witnessed firsthand what life was like for campesino families.

The experience was enlightening for me. I used latrines, “showered” from a water bucket, made tortillas, and practiced Spanish. As one of the most memorable experiences, I intimately interacted with a family with two adorable children ages one and four. I look at those pictures and still miss them!

One of the most important things I learned was to think critically and realize that each person views the world through their own lens. So many eye-opening encounters and unforgettable experiences made my journey one I would encourage anyone to experience.

Note: ProNica hosts delegations of up to fifteen students and professors for two weeks. Delegation participants’ perspectives are always changed. In 2008 Eckerd College, University of Florida, Washburn University and Haverford University will bring delegations to Nicaragua. Read about past delegations at www.pronica.org.

2008 Project Proposals are in...

At press time, four proposals have been submitted. The small Achuapa library requests $1600 for books, supplies and three sewing machines and materials. The Acahualinca Women’s Center requests $4400 for 1200 medical procedures, office and cleaning supplies, and to create informational flyers. Casa Materna requests $6600 for tubals and utilities. The Casa de los Niños requests $3200 for pap smears and to continue health education in rural villages.

We expect several more proposals before committee review. Your donation supports these vital projects. Please be generous. On behalf of our project partners and the many Nicaraguans they serve, ProNica thanks you.

A faithful supporter donated $8,000 for books. This donation will provide reading resources for children who depend on local libraries.

ProNica supports six school and community libraries. Past grant funds have replaced termite-damaged shelves and purchased text books, games and crafts supplies.

Since most schools have no text books, students use libraries for homework and study. Often libraries are the only place where children are encouraged in academics. Poor families struggling for basic necessities, such as food and shelter, prefer their children work rather than attend school.

Send a Gift of Life for the Holidays. We will send a hand-calligraphied certificate in your name.

Find ProNica newsletters online at www.pronica.org
Quaker House is a hospitality house offering simple lodging for travelers in Nicaragua. Located in a quiet residential neighborhood, Quaker House has a fully equipped kitchen, WiFi and is convenient to shopping, banks and restaurants.

Contacts for reservations:
011.505.266.3216
managua@pronica.org

Ways to support ProNica

- Mail checks to the stateside office, 130 Nineteenth Ave SE, St Petersburg FL 33705.
- Visit our website for secured online donations through PayPal.
- Gift of Life - in memory of a person or celebration of an event, ProNica sends a hand-calligraphied certificate acknowledging your financial donation.
- Name ProNica as a beneficiary in your estate planning. Contact us for details.
- Friends Fiduciary Corporation has plans for now and later giving. Contact us for details.
- Monthly gifts provide sustaining support for ProNica’s Project Partners.
- ProNica coordinates volunteers, college delegations, Friends Witness Tours for smaller groups.

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Your financial support assists projects such as those that feed children living in La Chureca, the Managua City dump. Thank you.