love for the helpless

What made ADRIANA FERRANTI, former translator and interpreter, devote her life to helping people with leprosy, the disease which causes family, friends and society to shun its victims? Years of unrelenting inner search causing major personal decisions led to an inspiration to serve leprosy patients. She responded, and taking on this work seemed "the most natural thing in the world." She is director of Maitri Charitable Trust, which not only helps people with leprosy, but also runs programs for TB patients, expectant mothers and starving small children, four village schools for more than 700 children. And a rescue program for over 30 street dogs.

It started in 1972 when, driven by existential angst, I saw that if I wanted to survive, I had to find meaning in my life. My realization that it had to be dedicated to others was followed by an unquestionable call to serve people affected by leprosy. My search included a re-conversion to Christianity, meeting Buddhism and Lama Thubten Yeshe and Lama Zopa Rinpoche, until in 1982 I went to India for a year, where I spent time at a leprosy training center. I was supposed to return to India to take on the leprosy colony project at Tushita Delhi, but visa problems diverted me to a job as director of Istituto Lama Tzong Khapa in Italy. It was not until 1989 that I could actualize my longcherished dream, and the Maitri Leprosy Prevention, Treatment and Rehabilitation Center officially began its free, professional assistance to the local Indian population.

The government has assigned us the Bodhgaya, Mohanpur and Barachatti Blocks, an area of over 1,500 km with 639 villages where we concentrate our activity. Up to August 31 this year, we have detected and registered 5,866 patients and released from treatment as cured 5,148, but the incidence of detected cases is still very high.

Our field workers, who are the binding element of all of our programs, are professionally trained and live in the field where they survey the villages daily. The detected cases are treated at 43 mobile clinics held every four weeks plus at seven weekly clinics held at the government's primary health centers.

This activity is supported by health education, which is one of the major aspects of leprosy eradication and is also used to raise awareness regarding other social problems.

When the leprosy eradication program is incorporated into the government services in 2003, it will still be our responsibility to provide treatment for side effects of leprosy at our campus.

Maitri Charitable Trust has six-and-a-half acres located at about five kilometers from Bodhgaya and I live there. We have a 15-bed hospital and an outpatients' department, with physiotherapy and day clinic facilities and offices. We have almost completed one building for patients disabled through leprosy, who will live permanently there. In all we have seven buildings. And, last but not least, we have a stupa.

As provided in the original plan, in 1995 we broadened Maitri's scope to include TB treatment, which is very expensive and therefore has for the time being to be limited to the poorest (private care is in fact available). TB treatment is meant to become a national program and when we hand over the leprosy program, we expect to be authorized by the government to do TB work on their behalf. We will then offer treatment to everyone in the area and continue the other health services and rural development programs.

The Mother and Child Care program started in 1997 and grew naturally, when I detected a starving 10-month-old girl and took her under treatment. I realized that it was necessary to start something for women, who are mostly undernourished and depleted. I thought that, by helping poor pregnant women,
we could also improve the condition of their children, particularly the females, and slowly introduce some birth control methods. We have so far helped 350 women give birth to as many healthy children.

Initially education was not one of my objectives, but I have come to see education in the villages as part of development in rural areas. In fact in the Village Schools project Maitri and the villages act as partners.

In consultation with the paramedical workers we selected some far away, remote areas, i.e. places where no other person or organization is working. We selected three clusters of villages, plus the nearby village, Dhandhwa, which requires special attention for its very low standard conditions – the harijans (untouchables) basically do not send their children to any schools in the area. And in fact the greatest success was to get the Dhandhwa villagers to build the school, as the other villages had done.

We have employed teachers, who shall live in the villages, motivate the villagers and ensure the full attendance of all the children from all castes and religions, and particularly the girls. Two and half years down the road the results show in the children’s enthusiasm, which I find astonishing. We provide formal education, while for the older children, who cannot fit in the age group, there is non-formal education, which is run like a parallel program for each class.

I think it is important to mention that we integrate all these programs with charity in the form of money, food, clothing, and other materials as required for the most needy among the patients and the pupils.

Finally there are the animals, for which I would like to develop a veterinary program. At present we mainly dedicate our energy to dogs, although from time to time we have rescued other animals. For many of them Maitri is a place where they can pass away peacefully, being cared and loved. Special prayers are said when they die, and then they are buried in our campus.

There are more programs that I would like to see developed, but some long-term collaborators would be required, possibly some highly educated and motivated Indian persons, who would make it easier for the local people and for our workers to understand the vision of Maitri, which overall employs about 30 people in the projects and on the grounds.

People wonder how I have managed all these years. I have not chosen this work, I have simply accepted that which was indicated I had to do, and I am in it with all my heart. Since it is basically impossible for me to stay back and not help relieve some of the suffering around us, I have to check from time to time, with total honesty, if these three factors are still united, if my motivation is still intact. If it is, then nothing else really matters. It is a constant inner work, an endless “peeling off” process.

Sometimes I feel that we are all as helpless as little children, and for this reason compassion is the thing we need most. In fact the world desperately needs compassion. And in this lifetime, for the time being this is my way to fulfill the responsibility, this is my Dharma practice.

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