

INTERNATIONAL MISSIONARY BENEFIT SOCIETY

# HEALTH

## Solidarity as a Church!



General Section  
Paris



Belgium  
Brussels



Central America  
Guatemala

West Africa  
Abidjan



Central Africa  
Yaounde



East Africa  
Nairobi



Madagascar  
Antananarivo

« I reserve particular greetings for the members of the IMS. Dear friends, I strongly encourage your service in the Congregations and Dioceses to facilitate access by their members to healthcare and thus promote their dedication to the mission. »

**POPE FRANÇOIS,**

Public audience in Rome on 13 May 2015



**+ 30,000  
BENEFICIARY MEMBERS  
ON 5 CONTINENTS**



**800 CONGREGATIONS,  
RELIGIOUS INSTITUTES  
AND DIOCESES IN  
140 COUNTRIES**



**PRESENCE OF EMI** at the AGM of the Association of Indigenous Congregations of West French-speaking Africa, Bamako, January 2019

**SISTER ELISABETH AULIAC**  
of the Chemin Neuf Community,  
President of the IMS



# International and ecumenical solidarity

**The International Missionary Benefit Society (IMS) is an association founded on 30 June 1965, under the auspices of the Conferences of Major Superiors of France.**

**Mutualist in nature, the IMS wished to be governed by Swiss law to ensure total neutrality. Not-for-profit, non-competitive and with the support and agreement of the Holy See, this organisation wishes to reconcile the two needs of international solidarity and national responsibility.**

**In the spirit of the Vatican II Council, it aims to enable all missionaries around the world, as well as men and women religious and clergy from young Churches, to benefit from an equal right to healthcare. The IMS is also open to the pastoral agents of other Christian churches.**

**A mutual assistance association in the spirit of the Gospel, it allows Major Superiors and Bishops to fulfil their canonical responsibility (C.619) in relation to their members, as regards healthcare.**

## A vibrant associative life

The IMS is characterised by a participatory way of working that allows the member communities to take part in the directions and decisions of the association.

**The General Assembly**, composed of delegates from the Groups and Sections of the five member continents of the Association, meets every three years.

**The Steering Committee** is responsible for the general operation of the association. It consists of fourteen members from the various Sections in which the IMS is present and meets once a year.

**The Sections** are the geographical relays of the IMS. They are responsible for the administrative management of the beneficiary members of the Groups in a geographical area and play a vital local role for the beneficiaries.

The Sections aim :

- > to reconcile two necessities: national responsibility and international solidarity
- > to allow everyone the right to health without discrimination on the grounds of race, nationality, place of residence and age
- > to allow solidarity between each member of the EMI in the world

**The Groups** are composed of members of the member communities (institutes, provinces, dioceses, monasteries, etc.). They are free to choose the Section to which they are attached in view of the conditions offered (language, currency, transfer of the treatment forms, etc.).

**Each beneficiary** member feels responsible, through reasonable use of the healthcare.

# Listening to situations, needs

- > **The IMS improves the conditions of the mission** for Christian ecclesial and pastoral agents around the world, working within the framework of Institutes and local Churches.
- > **In the event of illness, it undertakes to provide social and economic assistance** to missionaries, men and women religious, members of the diocesan clergy and religious communities of the Christian faith.
- > **It seeks the best protection of** the persons depending on the

context (standard of living, cost of healthcare, income, etc.).

- > **It studies assistance solutions to cover healthcare costs** in parts of the world where financial means are limited and the available healthcare is insufficiently developed.
- > **It also offers complementary solutions :**
  - medical evacuation in the event of a serious condition requiring immediate hospitalisation,
  - mutual social fund for occasional excessive healthcare expenditure.



## SPECIFIC TERMS

- > Contributions and assistance adapted according to needs and countries
- > Unconditional membership (age, health)
- > Collective and non-individual membership (list drawn up by the Major Superior(s) of the Congregation, the Bishop of the Diocese concerned or the lay group manager)
- > The same help for all beneficiaries regardless of age

## THE STEERING COMMITTEE November 2019



## THE IMS IN A FEW IMPORTANT DATES

### 1964

First discussions at the European level

### 1965

Constituent Assembly in Geneva in June

### 1966

Creation of the General Section and the Belgium Section

### 1967

Creation of the West Africa and Central Africa Sections

### 1973

Creation of the Madagascar Section

### 1995

Creation of the local option

### 2007

Creation of the East Africa Section

### 2010

Creation of the Central America Section

### 2015

50<sup>th</sup> anniversary of the IMS in Rome

## IMS IN ARGENTINA AND URUGUAY September 2019





Find the coordinates of your section on  
**[WWW.ENTRAIDE-MISSIONNAIRE.COM](http://WWW.ENTRAIDE-MISSIONNAIRE.COM)**

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**The International Missionary Benefit Society  
is a member of the Union Saint-Martin.**

**UNION SAINT-MARTIN**

FONDATION NATIONALE  
POUR LE CLERGÉ



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