



ማቴዎስ ወንድ - የኢትዮጵያ ካንሰር ሶሳይቲ  
 Mathiws Wondu - YeEthiopia Cancer Society

# FERTUNA

Special  
Edition

www.mathiws.org

## A HISTORIC MISSION

THAT TURNED BITTER FAMILY  
GRIEF INTO OPPORTUNITY!

Mathiws Wondu-YeEthiopia Cancer Society

# 20 YEARS OF JOURNEY

17.4.2004 - 17.4.2024





# The Naming of the Magazine **The** **Explanation Behind** **the Name Fertuna**

Fertuna Mesay was just 12 years old when she was admitted to our rehabilitation centre as one of our target patients. Like many other children in similar situations, she was unable to return home during her regular treatment intervals. As a result, she was granted the opportunity to reside permanently at the centre, allowing her to continue her education, which she had previously interrupted.

In response to a request from our society, Addis Rai'y School provided Fertuna with free tuition. Despite facing challenges in keeping up with her ongoing treatment she approached her studies with dedication. Rather than spending her free time playing like other children, she created handicrafts, which she generously presented to the centre as a token of her love and humble contribution.

Despite our best efforts to support Fertuna in her treatment and help her achieve her childhood dream of becoming a medical doctor, this was not destined to be fulfilled. Although she may have physically left us, her smile, kindness, and love will always remain in our hearts.

To honour Fertuna and express our love for her and the other children, we wish to name, our society's magazine "Fertuna." We assume that her name is a transliteration of the Italian name Fortuna meaning "Fortune." Until the day we reunite with her in the afterlife, we pray that God grants her soul eternal peace.

---

# CONTENT

- 4** Fertuna Magazine's Editorial Team
- 4** Regards
- 5** Foreword from the Directors of the Society
- 9** List of Founding Members of the Society
- 11** Major Contributions and Recognitions of the Society
- 12** Major Awareness Campaigns
- 18** Articles and Poetry about Mathiwalos
- 23** The Founders' Personal Life Stories
- 31** The Opinions of the Directors of Mathiwalos Wondu-YeEthiopian Cancer Society
- 35** The Way Forward: Healthy Africa Project
- 39** A Brief Overview of Key Projects in the Programme Sector
- 43** News Fertuna: Celebrating the 20<sup>th</sup> Anniversary
- 47** The Opinions of Cancer Patients and their Families
- 53** Key Awards and Recognitions Received by the Society
- 54** Tips for a Healthy and Happy Life

# Donors and Partners of Mathiws Wondu-YeEthiopia Cancer Society (MWECS)

## OVERSEAS



## IN COUNTRY



---

# Honors

---

MATHIWOS WONDU-YEETHIOPIA CANCER SOCIETY (MWECS) CELEBRATES THE

20<sup>th</sup>

**Anniversary of its  
Establishment from  
April 17, 2004, to  
April 17, 2024.**

First and foremost, with God's will, and the support from our volunteers, members, and partners, MWECS has transformed the tragedy that devastated Mathiwas Wondu's family into an opportunity that has accomplished many remarkable deeds that have greatly benefited the community.

---

**Fertuna Magazine Team**

**Chief Editor:** Mrs. Azeb Tamiru  
**Translator:** Dr. Metasebia Zewdu  
**Typist:** Mrs. Weyneset Haile  
**Printing:** Israel Printing

---

**Prepared by**  
**Mathiwas Wondu-YeEthiopia Cancer Society**  
**Resource Mobilization, Partnership and**  
**Communication Directorate**

**E-mail:** ICT@mathiwas.org  
azebt@mathiwas.org  
**Phone:** +251 118 122838  
**P.O.Box.** 80571  
Addis Ababa, Ethiopia

---

We extend our heartfelt gratitude to all who have stood by us and supported our society in achieving its objectives—our members, volunteers, benefactors, contributors, and partners. Thank you on behalf of our patients and their families. We also want to acknowledge the past leaders of the General Assembly and the Board of Directors, whose guidance enabled us to serve those in need. Additionally, we appreciate our dedicated staff, whose unwavering efforts have made our society a centre of excellence.

As part of our 20<sup>th</sup> Anniversary Celebrations, we are proud to introduce the Healthy Africa Project Initiative, which aims to establish a Center of Excellence for non-communicable diseases. We would like to extend our sincere gratitude to everyone who contributed to the development and publication of this magazine—our society members, individuals, patients and their families, staff, and publishing professionals. Your ideas, insights, and support have been invaluable.

---



# Foreword from the Chairman of the General Assembly

**Dr Kunuz Abdella**  
Chairman of the  
General Assembly

In honour of our society's 20th Anniversary, I would like to extend my heartfelt congratulations to everyone for successfully publishing the third edition of Fertuna Magazine!

Sustaining a local non-governmental organisation for two decades while achieving success in the non-communicable disease sector comes with its challenges. Gaining priority, attention, assistance, and substantial support in local and global contexts can often be challenging.

First and foremost, I want to praise the Lord for the strength He has provided us in overcoming these challenges. I would also like to express my deepest gratitude to our founder, all the sponsors, government entities, non-governmental organisations, members, staff, and volunteers who have made this journey possible.

Our society has maintained its dignity while collaborating with partners making significant contributions to eight ongoing initiatives. We continuously encourage collaboration with others to foster ongoing progress. Today, MWECS stands out as a highly respected organisation committed to accountability and transparency with its members, the government, and supporters through its policies, procedures, and actions.

**As a testament to our efforts, we have earned seven awards in total over the past five years-five international and two national!**

For the long-term sustainability of our society, we must acquire land to implement our vision of the Healthy Africa project. As a result, I sincerely invite everyone to join us in this important endeavour.

May the coming years bring you prosperity, health, and peace!



## Foreword from the Board Chairperson

**Dr Yetinayet Abebe**  
Board Chairperson

Initially, I would like to extend my heartfelt congratulations on the occasion of our society's 20th Anniversary marked by the release of this special third issue of Fertuna Magazine on behalf of the board, all our members, and myself. The fateful journey that began 20 years ago as a result of the tragedy that affected Mathiwos Wondu's family has gradually transformed into an opportunity by

recruiting **30**  
regular personnel,

registering over  
**1,400** members

and more than **500**  
volunteer workers,

and conducting  
**9 projects.**

Most of these initiatives are distinctive as they are unique to our country and are being implemented in collaboration with various partners and making a significant impact. Our organisation is as a result playing a vital role in the national effort to control and reduce the spread of non-communicable diseases. Furthermore, it is gaining increasing recognition nationally and internationally for providing essential support to over 175 cancer patients and their families.

Our society follows the principles of transparency and accountability in all its activities while complying with national legal obligations. As a result, it has earned respect and a strong reputation domestically and internationally. This commitment has led to the achievement of, two national awards and five international honours in just the past five years.

It is exciting to see the significant progress our society is making in strengthening its internal foundation and operational capabilities as this is essential for long-term sustainability. Another key focus is to retain a skilled and dedicated workforce that can provide the necessary care and support to cancer patients and their families/ caregivers. At present, our society can offer competitive salaries and benefits in line with available resources and industry standards.

In conclusion, I would like to emphasise the importance of our society's commitment to sustaining its long-term goal of developing the "Healthy Africa" project on a designated piece of land as this is crucial for the project's ongoing viability. I sincerely wish everyone peace, health, and prosperity in the coming years!



# Foreword from the CED, the Chief Executive Director

**Wondu Bekele**  
The Society's CED

Let me begin by offering my heartfelt congratulations to everyone at MWECS for being able to join in this momentous 20th-anniversary celebration of our society in good health and harmony.

**We experienced a tremendous amount of sorrow and pain after Mathiwos Wondu lost his battle with cancer. Although we could not save Mathiwos, we have since saved many others.**

**In response to this tragedy, the 15 founding members of the society decided to establish this organisation, which is now celebrating its 20<sup>th</sup> Anniversary transforming bitter grief into an opportunity.**

The organisation, founded and operated for six years from Mathiwos Wondu's family residence, experienced numerous successes and challenges. During those early years, the society managed to operate, without incurring administrative costs. Eventually, we were able to establish regular office operations thanks to funding from the Consortium of Christian Relief and Development Associations (CCRDA) which allowed us to hire a project officer and purchase a copying machine.

During that time, I was required to undertake two different responsibilities: I was the founder and manager of the society while working full-time as an administration manager at the National Tobacco Enterprise (NTE) and Mrs. Amsale Beyene, my wife, despite working for a private corporation also served as the society's secretary and treasurer. Neither of us received compensation for our contributions in these various roles.



Before long, my commitment to our society and my work at the National Tobacco Enterprise became increasingly incompatible. I was faced with a difficult decision when our society began to implement the anti-tobacco campaign. Ultimately, I chose to leave my full-time job where I was receiving a steady salary and benefits, and fully dedicate myself to our society. Just before I departed from the National Tobacco Enterprise, I was honoured with a gold necklace and received heartfelt appreciation for my years of dedicated service. This transition marked the beginning of the second chapter of the society.

After establishing the society as a formal entity by securing office space and hiring the necessary personnel, we faced increasing challenges in ensuring its independent operation. Our financial resources had dwindled leading me to consider the difficult decision of terminating the contracts of our two employees until our circumstances improved. We were even close to returning to our previous residence.

An incredible miracle unfolded through the Lord in two significant ways: first, the Campaign Tobacco Free Kids financing was made possible by generous donations; second, we were introduced to our compassionate sponsor, Mrs Phangisile Mtshali, through Pink Ribbon Red Ribbon funding. This support allowed the society to establish a modern operating system which facilitated greater achievements, hiring of additional staff, salary payments, and the resolution of transportation issues among other improvements.

**We honour  
Mrs Phangisile,  
who passed away  
unexpectedly last year,  
leaving behind a remarkable  
legacy that our society  
will forever cherish.**

Our society has earned a reputation and respect locally and globally due to its internal operational philosophy which prioritises responsibility and transparency. As a result, we have received a total of seven awards over the past five years, including five international and two national recognitions. While we take pride in these achievements, we remain focused on our vision and understand that what lies ahead is far more compelling than what we have already accomplished.

I would also like to extend my heartfelt gratitude to the Ethiopian Ministry of Health, the Minister of the Ethiopian Food and Drug Authority, the administrative offices of each region and city, our partners, and everyone else who has supported us on our journey. Their assistance has been invaluable as our society strives to fulfil its responsibilities and make a meaningful impact resulting in positive outcomes.

To achieve greater heights together, I urge all of you—our members, staff, and former leaders— to continue working together and collaborating as before.

I cordially wish you peace, health, and prosperity in the coming years.

*We will always remember Mrs Phangisile's unexpected passing and her generous contributions.*

Mathiwos Wondu-YeEthiopia Cancer Society (MWECS)

# FOUNDING MEMBERS

APRIL 17, 2004





The founding members of our society signed the Article of Association of our society at the first general assembly meeting being held at the Desalegn Hotel in Bole.

# OUR SOCIETY'S MAIN CONTRIBUTIONS AND RECOGNITIONS



# FERTUNA

www.ethiopiancancersoc.org



The National Cancer Control Plan of Ethiopia is being officially launched.



Receiving the Good Practice Award from the Consortium of Christian Relief and Development Associations (CCRDA).

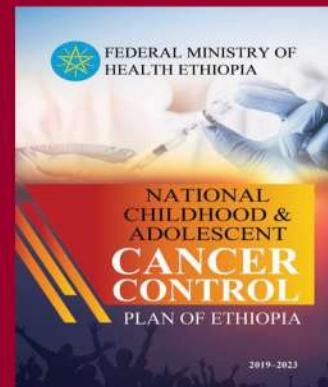
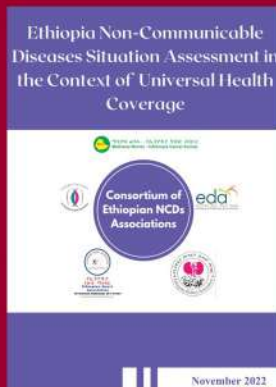


World No Tobacco Day Award 2020 ceremony from the World Health Organization (WHO).



Official launch of Ethiopia's first bronchoscopy and Ebus at the Tikur Anbessa Specialized Hospital

## A HISTORIC MISSION THAT TURNED BITTER FAMILY GRIEF INTO OPPORTUNITY!



Our society has made significant contributions to the development of the above studies and plans.

# Difference! LET'S MAKE A

Our society conducting a variety of awareness programs



Athlete Haile Gebreselassie delivering a speech during the walk



Worldwide beauty pageant contestants participating in the breast cancer awareness walk and millennium program



## To Mathy Wondu, My Beloved Son, Wherever You May Be

Your Mom,  
**Mrs Amsale Beyene**

The thought of you amazes me. I find myself wondering about the enigmatic ways of the Creator because of the ways you arrived in our lives late and left too soon.

Wondiye and I thought Yoni and Mizan were enough before you were born. On the other hand, we hadn't thought of having a third child until ten years after Mizan was born and that was only because our friends and family kept urging us to do so.

Everything changed the day you were born. We moved into a new home and got new beds, a sofa, and a TV but most importantly our lives transformed with your arrival.

You became our **"Tokichaw (The Only One)"** as Daniel Mekbib would say, and the head of the family! We discovered you in our later years and you filled our home with warmth and love flourishing in ways that even made us forget about Yoni and Mizan.



However, what happened a week after your second birthday is something I struggle to bear. All the joy and laughter vanished, replaced by sorrow and suffering. You were ill with cancer and your treatment became a daily, weekly, and monthly routine. I can't bear to think of the anguish you endured due to your illness, especially the pain during chemotherapy when the medication was given intravenously and the times when they extracted samples from your spine without anaesthesia.

Finally, as we prepared to send you overseas for medical care your chemotherapy began to cause tremendous pain, and you were bleeding profusely from your nose and mouth. At that moment, Wondiye and I feared we were about to lose you. However, we ultimately decided to accept whatever outcome awaited us.

After learning of your passing, Wondiye brought you home from Tikur Anbessa Specialized Hospital that evening at 8:00 PM and held your body in bed throughout the night. I was stunned to see him speaking at the memorial the next day. There was so much going on that I didn't understand at the time but now I realise those moments deepened my love for him and provided him with the support he so desperately needed.

Understanding the depth of our loss, Wondiye had an inscription made on your gravestone that reads,

**“ My dear family, I am now in a better place, in the hands of the Creator, so, until we meet again, don't worry about me... instead, strive to live a life worthy of forgiveness for our sins.**

Every Sunday, after prayer at St. Michael's Church in Bole, we visit your grave and light a candle in our honour. Your bedroom has become a sanctuary for your three dolls, bicycle, bed and ball which reminds us of you and deepens our longing to have you back with us.

You inspired us to establish the **"Mathiwos Wondu-Ye Ethiopia Cancer Society,"** which has grown to make a significant impact, supporting countless children in need. Above all, I wish you could return to us, but I've come to understand that's not possible. Instead, we must find our way to you. So, I will wait for the day I receive my call. Until then, may you rest in peace!

# “My Heart Yearns to See You!

The Babysitter's Memories



**Mathiwo's  
babysitter's  
heartfelt story  
told in tears**



Mr. Wonda was searching for a nanny for his newborn child while Yiftusira was seeking, a career. By chance, their paths crossed during those discussions, and she agreed to become Mathiwo's babysitter. From the very first day, Mathiwo felt a special connection with her. Yiftusira's heart remains deeply touched by the unbreakable love and bond they, shared.

## **Mathiwo's Childhood**

Mathiwo's entire family had fallen in love with him when he was just a month old. He developed a special bond with his nanny, Yiftusira, who fondly remembers, "**He was a lovely and bright baby.**"

**He loved spending the entire day with me, radiating so much energy. He was a healthy, beautiful baby and everyone who met him was impressed by his rapid and mature development, surpassing all expectations for his age. As he grew older, he continued to earn admiration and affection from those around him. We spent our days playing and singing together, creating cherished memories.**

He was a huge music fan. The song "Yasibishal Libbe" was one that he truly adored. Even after twenty years, this song still makes my heart ache. As she begins to recall her memories, Yiftusira cries and cries frequently. "I remember that his mother had a brother named Dany. At that early age, Mathiwo enjoyed copying Dany's actions. He used to wear a short T-shirt like him, wet his hair with water, and approach me with his own stylish walk.

**I said to him, "What is it, Mathy?"**

**He would answer, "I am Dany; I am not Mathy."**

Mathy often lacked an appetite for food so sometimes we would pretend to be chefs and play. During these games, he would eat and I would prepare the food and serve it to him. He takes a fork and samples the dish, saying "Itete," a loving word for Yiftusira.

**"Food tasting is done only once, OK?"** he asks, looking up as he tastes the meal. **"Okay,"** I would respond.

I would often take him to the Ghion Hotel to keep him entertained. Playing was his passion and once he began there was no stopping him. According to Yiftusira, Mathiwo was remarkably healthy and did not suffer from significant illnesses, even a common cold, until he turned two years old.



## The Initial Stages of Mathy's Illness

Mathiwos's body was covered with skin infections that resembled water droplets. He was taken to the hospital where he was treated for allergies. One day, after a nap, he woke up to find Yiftusira by his side ready to feed him. That moment, he opened his eyes and began to breathe rapidly and forcefully. Noticing this, Yiftusira quickly scooped him up and held him close. She saw a pale flush spreading across his lips and face and his stomach appeared swollen. Frightened, she hurried to a neighbour who was a nurse for help.

After reassuring Yiftusira, Sister Tsige carefully examined Mathiwos. "I see he has a low oxygen level," she noted. "Has he ever experienced heart disease?" Yiftusira replied, struggling to stay composed, "No sister, he hasn't had any problems like this before."

When his father returned home in the evening, Yiftusira explained everything that had happened. Without hesitation, he drove Mathiwos to the hospital. That little boy, who had never faced illness before, would not be coming home anytime soon. The doctors advised that he be admitted immediately and start treatment. At that time, Mathiwos was just two years and two months old.

## The Beginning of His Suffering

The events of that time were heartbreaking for all of us. The doctors diagnosed him with blood cancer. "I will never forget the terrible things that happened that day; everyone was overwhelmed with stress. I thought cancer was a disease that didn't exist in our country. How could this happen?" Yiftusira recalls his mother's pain, saying, "I still can't bear it." Mathiwos spent two months on the seventh floor of Tikur Anbessa Specialized Hospital, receiving medication and treatment.

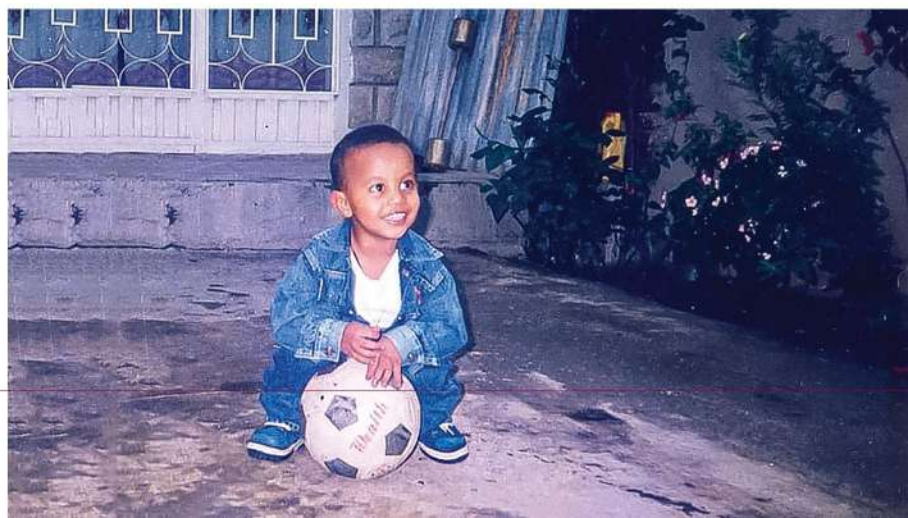
I fear I will never witness such suffering again in my life. I never left his side, staying with him day and night, and he never wanted me out of his sight. The long nights and his pain... it's hard to put into words! I don't want to remember seeing children his age, who should be playing and enjoying life, instead of facing such agony. It's difficult for me to express how I feel."

I occasionally gazed out the window from the seventh floor of Tikur Anbessa Specialized Hospital. The children of the medical staff would run and play with the young patients. Turning back, I would see Mathiwos lying in his bed, frail and struggling. In those moments, I found myself wrestling, with my Creator, asking, "Lord, do you not care for these children?? Why must they endure such suffering??" I longed for clarity and begged the Lord in prayer for Mathiwos to be healed.

"The evenings at the hospital are harder than the days. Many children passed away, and I often wondered when it would be our turn. I started to lose hope in those moments and felt like giving up. I had always imagined that Mathiwos would grow up to be lovely and cheerful. He dreamed of becoming a pilot, and I would think about the day he would mature and take me on adventures, around the world. He used to say to me, 'Itete, I'm going to be a pilot.'"

## The Hope for Wellbeing ...

After two months of treatment, Mathy recovered and returned home. His hair had fallen out but grew back, and he became a lovely and healthy boy again. He felt so good that it was hard to believe he had ever been sick or endured those difficult times. He celebrated a joyful third birthday, and his family thought it was the perfect time for him to start school. However, Yiftusira disagreed saying, "He's not ready for school this year; let me teach him at home, help him learn the alphabet, and let him play." Everyone recognised Yiftusira's good intentions and her kind heart for Mathiwos, so no one objected to her plan. However, the optimism surrounding Mathiwos's recovery was short-lived. His period of good health lasted only eight months after his third birthday, and he found himself back at Tikur Anbessa Specialized Hospital once again.



## Times of Anguish

"Mathy was unable to recover." His ability to tolerate medications worsened with each passing day. Symptoms such as an enlarged belly and breathing difficulties drained his strength, leaving him weak. It was incredibly challenging for his family to cope with these circumstances beyond their control. Meanwhile, they were also making arrangements to seek treatment for him abroad.

"All we witnessed was a steady decline. Mathy was reluctant to let me leave his side. He used to say to me, 'Itete, come! Don't leave.?' Yet, he never directed that question to his mother. She spoke less, consumed by her worries and pain. Mathy didn't want her to leave him; instead, she would often stand, by the window, gazing outside."

"He used to say to me, Itete, come, don't leave. I used to spend time with him, talk to him, and even sing for him. When he didn't have treatment sessions, I would take him downstairs, where he would watch other children play ball. That made him happy, and he said, 'Itete, take me.' When the door opened, he asked, 'Is that the doctor?' He also used to say, 'When I grow up, I'll be the one giving the doctor an injection.' And I merely smiled at him, despite my great sorrow. He tried to laugh, but I recognised that his laughter was filled with hopelessness and sadness, which disturbed me."

Yiftusira's eyes welled up with tears during this stage of her narration.

## Mathy's Last Moments

Things took a turn for the worse. Mathy grew weaker. One day, a doctor came to examine him and noticed something concerning on his face. That night, Mathy's mother cried the entire time. "My son will not survive this night," she confided in me. I tried to hold back my thoughts and replied, "The Creator knows, and whatever He wills will happen." Watching her struggle, I wished I could take Mathy and fly away, but where would we go? That night, Mathy left us.

## Life after Mathy

"Everything felt empty and desolate; after we lost Mathy, the house became lifeless." Whenever the family went out for the day, Yiftusira found it hard to be alone at home. She could still hear Mathy's voice echoing throughout the house and yard, and she realised she couldn't stay there any longer. One day, when Mathy's mother returned from work, Yiftusira said, "I need to leave." Her words shocked both Mathy's mother and herself. Mathy's mother began to cry, saying, "My son will die a second time when you leave this house."

Although Yiftusira tried her best not to bring up this unpleasant question again, she was unable to resist. The entire family accompanied her to Bole Airport filled with sadness and love. Mathy's mother embraced her tightly, sobbing. "Losing Mathy and you feels like two deaths for us! But you must go on and live your life. I used to see my child in you."

"I couldn't stop thinking about Mathy. While working in Syria, I had hung his pictures on the wall of my room, and my madam once asked, 'Is he your son?' I replied, 'Yes, but he is no longer alive.' As soon as I enter my room in the evening, I turn on the light, feeling as if I had left him alone in the darkness. 'Mathy, I left you in the dark, didn't I?' I ask him as if he were still alive. How can I come to terms with Mathy's death?"

## Mathy Hasn't Been Forgotten

Yes, the way Mathy left is not to be forgotten. Yiftusira finds inspiration in seeing children receiving care and attention from the charity named after Mathiwos. "Today's children have more hope than previous generations. It's heart-wrenching to see children suffer. The fact that so many are being helped in Mathy's name reassures me that this is all part of God's plan. 'For good.'

"What greater joy can there be than watching children receive care, comfortable housing, and the chance to be healthy and close to their families? Yes, there is no greater fulfilment than reaching out to those children who cannot express themselves properly," Yiftusira explains. The bond Yiftusira shares with Mathiwos's family is profound. She feels a strong connection to them through the good and bad times, saying, "They have become like parents to me." Even after the birth of her own children, they have remained by her side, becoming godparents to her kids and further solidifying their bond. She often reflects, "In all this love and family connection, one thing is missing: Mathy!" She wishes he were alive. "Mathiwos is still with us, serving as a source of hope for other children. Mathy is alive!"





# Mathy Due to Your Departure

Even while each decade that passes suggests a far-off past  
 With everything that has passed,  
 Who can take Mathy's memory out of our hearts?  
 His character and unceasing smiles are unfading and will always be missed.  
 Think back, Mathy, our brother!  
 Who is with us even though he has left us?  
 Whom we miss, and yet we are unable to hug him.  
 Whose genuine kindness we experience,  
 Whose voice never goes unheard...  
 We persevere because we have a single belief in our hearts:  
 That our thoughts are speaking to you in a monastic state.  
 Rain is necessary for trees to grow and for flowers to bloom,  
 The same holds for you...  
 Mathy, how many more children have survived as a result of your death?  
 How many people who had given up on hope have been revived?  
 How many more people laughed after your laughter was gone?  
 How many people have lived with their hopes shining bright?  
 How many people like living with passions on the brink?  
 Mathy, because of you, they were gone but have come back.  
 How can we say you died while you're right at our side?  
 Why are we crying, and why? "We lost our Mathy."  
 Yes, Mathy, that is true. You're no longer at home.  
 And abandoned us in a state of unfathomable sorrow and despair!  
 Nevertheless, you gave your life to others because of your good nature!  
 To bring others back to life, you endured suffering.  
 Just like it was yesterday and always,  
 We always have your affection inside of us, Mathy!

(Yonas Wondu, Mathy's brother)  
 (Mizan Wondu, Mathy's sister)

# The Great Blessing

I thought you were overcome  
 and defeated by death! ...  
 Oh! Mathy, you've left from life...  
 Imagining you in my head,  
 But my heart whispers to me  
 in sighs about your unlimited life,  
 Which stands higher than your,  
 passing away.  
 Indeed, you are here among us.  
 No! You have not abandoned us at all.  
 When children experience happiness  
 and relief from sorrow,  
 They become healthier and more hopeful,  
 Dreaming about tomorrow and  
 witnessing that blossom.  
 In all this, it's evident that you're alive,  
 You've lived forever in those radiant years!  
 This is the greatest significant blessing  
 within the purpose of living.

(Dawit Gebru)  
 He is no longer with us due  
 to his passing away.

## ONE MATHIWOS HAS PASSED, WHILE NUMEROUS MATHIWOS'S HAVE BEEN SAVED **THE NURSE'S MEMORIES**

Sister Birke Duressa, a nurse with 35 years of experience, has wholeheartedly committed herself to her work. She has consistently gone above and beyond while working in various governmental and non-governmental organisations. She was one of the medical staff who cared for Mathiwos after his admission to Tikur Anbessa Specialized Hospital. Although Mathiwos passed away 20 years ago, she recalls those memories as if they were just yesterday.

Mathiwos was four years old when he was admitted to Tikur Anbessa Specialized Hospital. At the time, Sister Birke worked in the Children's Ward. It did not take long for them to create an immediate bond that transcended medical care. Mathiwos became attached to sister Birke. "I was very close to Mathiwos," she reflects. "We shared a deep bond, and no one else could give him injections, draw blood, or bring him medicine because he relied on me for support. Despite his intense pain, he was a challenging patient for other doctors. I saw Mathiwos as my own child, especially since I had a son, who was the same age. I truly loved Mathiwos," the sister remembers.

Mathiwos was a charming, appealing, and empathetic child. When he wasn't in pain, he was cheerful and energetic. Because of Mathiwos, I was also able to get to know his parents well. The sister recalls, "I was very cautious when giving him injections. Mathiwos treated me differently from the other personnel."

Sister Birke describes Mathiwos's family as generous and considerate, which helped her build a strong relationship with them.

While overseeing Mathiwos's medical treatment, Mr. Wondu showed the same care and concern for other children, doing everything he could to support them. When he bought medicine for his child and noticed that other children were in similar situations without any, he compassionately shared his supplies with them. "These acts inspired me to connect with Mathiwos's family," she reflects.

When Mathiwos was free of pain, he would even sing for her, Sister Birke shared. He would sing, "Hakime Nesh Medhanite," and that moment will always stay with her. She spent time with Mathiwos because she felt deep empathy for him given his young age. "I dedicated my time to helping other children suffering from cancer, not just him," the sister explains. Sister Birke shared that she truly believed Mathy would make a full recovery. "I hoped he would get better. One ominous Friday, he fell ill just as the weekend began, followed by a public holiday on Monday. We were so anxious and prayed fervently. Then I had an idea. Knowing several people at the Red Cross Society, we made every effort to secure blood for him. We did everything we could to save Mathiwos and determined that he shouldn't pass due to a lack of blood. Witnessing Mr. Wondu's selfless dedication to helping others inspired me to take responsibility for this situation; it empowered me."

Finally, we were able to provide him with the blood he needed. I still get great joy from the fact that he lived that day despite all the difficulties we were going through. At the time, honestly, Mathiwos had no shortage of prescription drugs or other needs. However, his departure was merely God's will.

Mathiwos looked for Sister Birke's presence even in his last moments. As Sister Birke remembers that terrible day, tears build up in her eyes. "I observed that Mathiwos was getting close to the end of his life. He approached me as I was getting ready to give him an injection and asked, "Sister Birke, could you please give me a hug?" Then I took him out of his mother's arms and cuddled him. He couldn't let go of me. The time was ticking down, and it was getting darker outside.

Since I had to go home, I excused myself by telling him that 'I need to see the other patients' and handed him over to his mother. He was taking his last breath—I knew he was going to die. After I left, I saw the situation from a distance and realised what had happened when I noticed people gathering the stuff around him. It was an extremely, difficult day.

After this heartbreaking incident,

**Mr. Wondu comforted me on the third day, saying, "I stopped shedding any more tears." While we lost Mathiwos, his legacy became a reason to save many others. From now on, we will rescue more children. This reflects the teachings and actions of Jesus. Who, after losing their child, says, "Let's save other children?"**

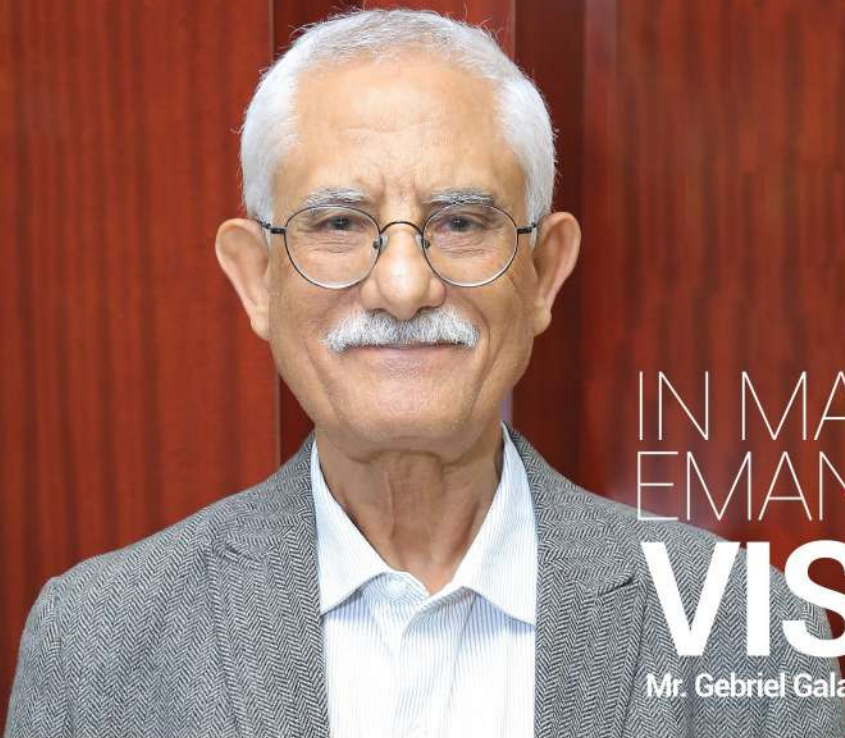
"What Mr. Wondu said at the funeral is something I will always remember. He didn't cry that day. He remarked, 'I did everything I could for Mathy, but his time had come.' He also expressed gratitude to the doctors, nurses, and caregivers who supported him in caring for his child. 'Please, Sister, don't cry. We have lost one Mathiwos, but we will save many more,' he told me. Today, his dreams are becoming a reality."

**Sister Birke has been a faithful and dedicated companion to Mr. Wondu since the establishment of the Mathiwos Wondu Ye-Ethiopia Cancer Society in his community.**

"All of this became possible because God was with him. There is no fraud or embezzlement within the organisation. It doesn't practice nepotism, nor does it favour the families of relatives. Is it any wonder that everything striving for virtue flourishes? No, it will continue to thrive; it will keep growing. As I've always told him, you started this with genuine devotion, and it won't be confined to Ethiopia alone; one day it will reach other nations."

The charity, which began with just five children, now supports around twenty-five, providing them with the attention and assistance they need. They receive medical care, nutritious food, and prescribed medications. When appointments are scheduled, patients are regularly referred to Tikur Anbessa Specialized Hospital to ensure their medical needs are met. Sister Birke has highlighted significant differences between the care provided today and that during Mathiwos's time. Previously, children with cancer were treated alongside other patients, which increased their risk of opportunistic infections and lowered their chances of survival. As a result, Mathiwos's condition would fluctuate, at times worsening and at others improving.

Children deserve access to a hospital specifically designed for their care Sister Birke believes. "My goal was to become a parliamentarian so I could establish a children's hospital dedicated solely to treating sick children," she stated. She also feels a sense of peace knowing that this charity was created in Mathiwos's memory. "I truly hope this organisation continues to grow, ensuring that kids receive the best possible care and fully recover from their illnesses. I believe the objectives of the 'Healthy Africa' campaign will ultimately be realised." Mathy and the act of remembrance are the reasons behind all of this.



# IN MATHY'S EMANCIPATED VISION

Mr. Gebriel Galatis

**Grawa Town, Garamuleta Awraja, in the Eastern Harergie Region, is the birthplace of Mr. Gebriel Galatis. After completing his education in Development Planning and Economics, he has dedicated over 32 years to the humanitarian sector, working with various governmental and non-governmental organisations.**

**Mr. Gebriel has been an extraordinary advocate for Mathiwos Wondu Ye-Ethiopia Cancer Society since its inception, contributing significantly to its success. He served as the society's first Chairman of the Board for seven consecutive years and remains a dedicated supporter of the organisation.**

When Mr. Gebriel worked for one of the country's international non-governmental organisations (INGOs), he received this painful message via email. "My child has been battling cancer and is not doing well. I have done everything I can to support his medical treatment. However, since the situation is beyond my control, I need your assistance and am reaching out to you in any way I can."

That's where the whole thing began.

He was shocked by what he just read! Being neighbours, he was already acquainted with the writer of this message, although from a distance. Emotionally touched by the message, Mr. Gebriel began to wonder, "What can I do to support this call? How can I assist?" What kind of medical support would be required to assist a young cancer patient? The news he received was both challenging and deeply stressful at that moment.

Mr. Gebriel spent several days thinking and worrying about the situation. During a community meeting, someone stood up to ask for help, sharing the heartbreaking story of their child. That person was Mr. Wondu, Mathy's father. Mr. Gebriel realised that Mr. Wondu was the sender of the email. Reflecting on that pivotal day, Mr. Gebriel recalled, "I was shocked; I was filled with worry and stress about what to do." This moment unfolded during the community meeting in their neighbourhood.

After the meeting, Mr. Gebriel flew to Toronto, Canada, representing his organisation. Despite his official duties, he remained focused on Mathy's urgent medical needs and how he might help. Later, while discussing Mathy's situation with a Canadian medical professional at the Sick Kids Hospital in Toronto, he inquired if there was any way to facilitate Mathy's cancer treatment. The response was positive, and arrangements began promptly for the technical details and logistics of his trip to Canada. However, during this time, Mr. Gebriel received a heartbreaking call from his wife in Ethiopia, sharing the devastating news that Mathy had passed away.

It was truly devastating! Mr. Gebriel can still recall that moment as if it were yesterday. "My thoughts drifted to that adorable toddler, full of smiles and joy. He had been admitted to Tikur Anbessa Specialized Hospital, and I had gotten to know him before my trip to Canada. We had chatted while he sat on his bed, leaning against his father's chest. His hair had all fallen out due to chemotherapy, but fresh reddish-brown hair was beginning to grow back. What a sweet little boy he was!"

Mathy's parents wanted to ensure their child was never forgotten, despite the enormous sacrifices they had made to save his life. Though they were still grieving, they acted swiftly driven by their love for him. With the motto "Mathy shouldn't be forgotten," they aimed to create something that would honour his memory.

**"Looking back, I truly believe that was God's plan for things to unfold the way they did," Mr. Gebriel remarked. When Mr. Wondu shared his idea of establishing an organisation in honour of his child, I was genuinely in awe! At that moment, I prayed silently, asking God to grant him the courage and wisdom needed to fulfil this mission. Mathy's passing, I felt, was part of a greater plan to save many others. Ultimately, I believe the organisation has become profoundly important and impactful.**

It's truly remarkable how many individuals have been reached through the support and assistance provided by Mathiwos Wondu-YeEthiopia Cancer Society; after all, Mathy has not been forgotten! Over time, the idea of Mathiwos's memorial evolved, nurtured, and refined. Whenever Mr. Wondu returned home from work, he dedicated himself wholeheartedly to his vision.

**Meanwhile, the INGO where Mr. Gebriel was working allowed him to use the remaining funds for the project he was planning and involved in.**

This opportunity allowed him to contribute to Mathiwos Wondu-YeEthiopia Cancer Society at a crucial moment. With financial support of about ETB 30,000, Mr. Wondu began working actively from home using the funds to purchase a desktop computer, a desk, and a chair. In the long run, this funding significantly enhanced the society's organisational capabilities.

The legal procedures were also completed, and Mr. Gebriel became the board's first chairperson, providing substantial assistance along the way.

"Since its establishment, the Mathiwos Wondu-YeEthiopia Cancer Society has faced numerous obstacles and challenges, but these have created a strong sense of purpose and dedication, leading to outstanding accomplishments over the past 20 years," stated Mr. Gebriel. Even when cancer was not as well understood as it is today, the society provided generous support and care to those in need despite the difficult circumstances. I am grateful to God for witnessing all these improvements.

In closing, Mr. Gebriel urged everyone—both governmental and non-governmental sectors, or individuals—to give special attention and support to the society's new project, "Healthy Africa," to turn it into a reality. Establishing a Center of Excellence will require significant investment to address the growing concerns of non-communicable diseases worldwide. This centre aims to align with its mission to help those in need. It will offer a range of services, including research facilities, medical care, and rehabilitation centres for cancer patients.





## From the Founders' Own Words

Mathiwos Wondu-YeEthiopia Cancer Society :  
Turning a Bitter Grief into an Opportunity.  
A Cancer Society Established as Result  
of a Child's Love

### Personal Life

**Question:** Could we begin with your name? Could you please let us know the day and place of your birth?

**Answer:** My name is Wondu Bekele. I was born in the village of Burka, Eastern Harergie, Deder Woreda, Oromia Region, in 1954 G.C.

**Question:** Could you share your marital status with us?

**Answer:** Yes, I have a life partner. Her name is Mrs. Amsale Beyene. We have been married for over 40 years and have been blessed with three children. Our last child passed away, and we now have a boy and a girl.



**Question:** Could you tell us the level of academic achievement you have obtained? Where and how long have you been working?

**Answer:** My educational background includes a BA degree in Government Studies from Addis Ababa University, a Diploma in Economics from Bulgaria, and, most recently, an MA degree in Development Management. I have over 40 years of professional experience, which includes four years as an air traffic controller and 16 years as a manager in various textile industries. Additionally, I spent 14 years at the National Tobacco Enterprise (NTE), where I served as an administrator, human resources manager, and public relations officer. In December 2009, I resigned to focus on the Mathiwos Wondu-YeEthiopia Cancer Society (MWECS), where I currently serve as the Chief Executive Director.

## How and Why Did You Become Involved in the Battle Against Cancer?

**Question:** Could you share with us what inspired you to resign from your job?

**Answer:** As I mentioned earlier, my involvement began while I was working as an administrator and human resources manager at the NTE. It was during this time that my child's battle with cancer opened my eyes to the realities of the disease. This experience not only took my beloved son's life but also made me aware of cancer's status as the second leading cause of death worldwide, inflicting unimaginable suffering on many people in my community. I felt compelled to take action. I had hoped to continue working at the NTE while volunteering with MWECS. This would have allowed me to earn a stable income while contributing to the society until it became self-sustainable. Unfortunately, this was not feasible for me.

**Question:** Since the primary focus of this interview is on this initiative, could you explain your responsibilities at MWECS and when you began your work there?

**Answer:** On Saturday, April 17, 2004, I was one of the 15 founding members of MWECS. I have been serving as the Chief Executive Director (CED) since the organization's establishment.

**Question:** Before you resigned from the NTE, you also volunteered with MWECS. Wasn't it difficult for you to handle these two responsibilities simultaneously?

**Answer:** I worked full-time as a paid employee at the NTE while dedicating six years to MWECS. My salary and benefits from the NTE were sufficient, but MWECS was in its early stages, with a limited organisational structure and financial resources. I volunteered my time without compensation. I shared what I had to support the centre. Although it was challenging and demanding, I felt I had no other option at that time.



## The Tremendous Efforts Made to Maintain the Existence of the Society

**Question:** Where was the society's headquarters located? How many personnel did it have?

**Answer:** Due to the society's dire financial situation, we operated from home for six years without any charge. During this time, our daughter Mizan Wondu, our son Yonas Wondu, and my wife, Mrs. Amsale Beyene, managed the treasury and secretarial duties, while other volunteer members and supporters took on the remaining tasks without compensation. The Consortium of Christian Relief and Development Associations (CCRDA) helped us by funding the hiring of a project officer, which significantly enhanced the society's long-term sustainability. We are truly grateful to CCRDA for their timely and generous support.

# Who is Mathiwos? How and Why Did He End Up Being the Driving Force Behind the Society's Establishment?

**Question:** Is it true you had Mathiwos late?

**Answer:** Absolutely, Mathiwos arrived ten years after the birth of our daughter. We had initially decided to stop having children for various reasons. Due to different influences, we chose to become parents again, leading to the birth of our third child, Mathiwos.

**Question:** Could you perhaps elaborate on what you mean when you say, "various influences"?

**Answer:** In various ways, our family and other relatives made numerous attempts to persuade and motivate us to have a third child. We hesitated for a long time before deciding to have a third child.

**Question:** Is it necessary to be so concerned about having a child?

**Answer:** Absolutely! Deciding to bring a new human being into the world demands careful deliberation since it carries a great deal of responsibility. Before concluding, we had to evaluate many factors.

**Question:** Could you please clarify what you mean by this?

**Answer:** Before making a decision, we discussed whether we could meet the additional child's needs. We also needed to build a larger house to accommodate the entire family. On Wednesday, June 16th, 1999, the day Mathiwos was born, we moved into our newly built house in Bole. The house had been furnished with a new sofa, beds, television, and other furniture. We had a wonderful time with Mathy for around four years, "the most satisfying and joyful moments we had with him."

**Question:** When and how was it discovered that Mathiwos had cancer?

**Answer:** We celebrated his second birthday surrounded by family and friends, and the occasion was filled with love and excitement. However, a week later, we noticed some behavioural changes in him; he became withdrawn and developed a wound on his leg. We first took him to a nearby clinic and then to St. Gabriel's Hospital for further examination. Ultimately, on the same day, we had to take him to Tikur Anbessa Specialized Hospital, where he ended up lying on a bench in the waiting area.

**Question:** What led you to have him transferred to another hospital?

**Answer:** At that time, Tikur Anbessa Specialized Hospital was the only institution in the country providing cancer medical care and treatment. Therefore, we had no choice but to take him there.

**Question:** What was your initial reaction upon finding out that your child had cancer?

**Answer:** We were all anxious and depressed, but my wife, in particular, struggled to maintain her composure. None of us was prepared to confront the reality of the situation. When we learned that he had a terminal illness, it felt as though our vibrant and energetic child had been taken from us. We entered a time of deep sorrow and grief.

**Question:** How did time pass at the hospital during those initial days?

**Answer:** As I mentioned, we left home early in the morning and found ourselves at Tikur Anbessa Specialized Hospital, where our child lay on a bench in the corridor. His treatment began immediately, as there were no available hospital beds. He received multiple injections in various parts of his body, bled profusely, and endured excruciating pains. Words can't fully describe the difficulty of that day, and I still marvel at how we managed to accept it all. I believe this experience underscores that cancer can affect anyone at any time.

**Question:** How did you manage, accept, and deal with the situation?

**Answer:** Mathy was born by God's will after we made extensive preparations to welcome him into our lives, and we had moved into our new house. His childhood filled us with joy and enthusiasm; he radiated like a light, drawing everyone's attention. It was hard to accept the reality of cancer when he was so full of life. God blessed us with an adorable child only to take him away; there was no way to bring him back. Gradually, we came to understand that as Mathy left us, we would eventually go to him when our time came, rather than hoping for his return. We realised that all human beings have a limited time on this earth—not the permanence we naively believed. We had to accept the loss of our child, no matter how painful it was. In that acceptance, we also recognised the value of transforming our challenging circumstances into an opportunity to support other children like Mathiwos.

**Question:** After Mathy's death, it's clear that you must have felt profound sorrow. I've heard that you didn't cry during his funeral but instead gave a speech beside his tomb. Is that correct? If so, could you explain how you managed to do that? Doesn't this seem contradictory to what you're expressing?

**Answer:** In short, it's incredibly difficult to convey everything that cancer brought into our lives, especially regarding our child. During his chemotherapy, we faced numerous challenges, such as having to obtain various prescribed medications from abroad on a daily, weekly, fortnightly, and monthly basis. We spent at least ETB 500 each day, all while facing ongoing difficulties in acquiring essential blood products from the blood bank. The intense suffering he endured during treatment was heart-wrenching for him, and our entire family felt his pain. As a result, I felt that shedding tears at his burial wasn't enough after all we had experienced. I chose to honour him by simply participating in the solemn funeral procession, carrying immense sorrow in my heart. I also decided to thank God for the brief time we had to cherish our child, even if it felt insufficient. Ultimately, we learned that it's better to transform sorrow into love by giving all the glory to God.

**Question:** If the local cancer treatment was inadequate, didn't you consider taking him abroad for better care?

**Answer:** The medical treatment at Tikur Anbessa Specialized Hospital was insufficient, and obtaining the necessary medications proved challenging. However, we did our best under the circumstances. At that time, my older brother, Mr. Kebede Bekele, who managed the Ethiopian Airlines Far East Office, had access to the medical products we needed from India and other countries. During Mathy's two years of treatment, he made significant progress thanks to the dedication and collaboration of the physicians with the support from everyone around us. I also maintained contact via email with St. Jude's Children's Hospital in Memphis, Tennessee to gather more information about his medical condition. They were closely monitoring his situation and were optimistic about his recovery. Due to his rapid and steady improvement, it was anticipated that he might be able to stop treatment within two to three months. However, that was when his condition began to decline after initially showing signs of hope.

**Question:** What made him more ill? And what happened next?

**Answer:** At that time, Mathy's treatment had resulted in dead cancer cells in his body. The next crucial step was to ensure that no new cancer cells formed, preventing a resurgence of the disease. His survival rate was about 80% at that point; however, if the cancer cells began to reproduce again his survival rate would plummet to 30%. This situation compelled us to seek medical treatment abroad. After the medical board indicated the urgent need for international care, we actively searched for solutions everywhere we could.

**Question:** What efforts did you make and what outcomes did you obtain?

**Answer:** When we realised that Mathy's treatment abroad would require a significant amount of money, we made the difficult decision to sell our house to cover the expenses, as our other financial resources were dwindling after two years of his diagnosis and treatment. However, the doctors advised against this decision, suggesting that selling our property wouldn't truly help, as even with treatment abroad, his chances of survival were still uncertain. They recommended that we seek sponsorship for free treatment instead. Taking their advice to heart, we actively sought the necessary assistance. Ultimately, through the efforts of our dear friend Mr. Solomon Nega—who is sadly no longer with us—Mathy received free medical care at the American Cancer Institute in Washington, D.C. (Maryland). Once this was confirmed, my wife and our eldest son, Yonas Wondu, made arrangements for travel and accommodation during the treatment. Yonas was selected as the donor after blood tests were conducted for five of our family members. These samples were sent abroad via Federal Express, as such tests weren't available in the country at the time. In addition, Ethiopian Airlines generously sponsored a round-trip ticket for Mathy to the U.S. As we eagerly awaited the day of departure, tragedy struck—Mathy suddenly passed away on Wednesday, September 24<sup>th</sup>, 2003, at 8 PM.

**Question:** What took place next, may I ask?

**Answer:** At the beginning of September, as Mathy's condition worsened significantly, we began to suspect that his life was nearing its end. I started preparing for his funeral and contemplating how we should say our final goodbyes. Accepting the reality of that moment was incredibly difficult, but it was unavoidable; we were losing the child we loved.

Once he passed away, we took his body home and spent the night with him. Early the next morning, he was laid to rest peacefully in the cemetery at St. Michael's Church, attended by many who gathered to pay their respects. Despite the circumstances, as I mentioned earlier, we did everything we could to ensure his body was placed in a dignified and respected mausoleum—Fuka. During the funeral, I delivered a speech without shedding tears. We have come to accept our child's death as God's will, and we planned to establish something in his name to support others until we, too, depart from this world and meet him again in the future.

**Question:** How was the society's establishment decided?

**Answer:** The efforts to save Mathy were extensive and had a global reach, and it was clear that this goodwill campaign should not come to an abrupt end with his passing. Instead, we felt compelled to continue the momentum in his honour. After considering all our options, we decided to establish an organisation focused on cancer-related issues. This initiative would provide support to many other cancer patients and their families who faced similar challenges, allowing us to channel our grief into something meaningful.

The official establishment of the society took place at a meeting that was convened on Saturday, April 17, 2004. Mr. Solomon Nega had previously contributed ETB 200, which was supplemented by US\$ 200 from Mr. Kevin Kashman, along with ETB 1 found in Mathy's pocket.

## The Main Purposes of the Society

**Question:** Regarding the society's establishment, what are its main objectives?

**Answer:**

1. Change misconceptions about cancer and enhance public awareness regarding its nature, prevention, and treatment options.
2. Create an enabling environment for cancer treatment in the country and provide moral and material support for, individuals in need.
3. Support, the establishment of a Cancer Institute to provide comprehensive cancer care, facilitate research authorisation, and exchange experience.
4. Encourage local treatment centres and educational institutions to engage in cancer research initiatives.

**Question:** To put its objectives into execution, what steps is the society taking?

**Answer:** When it comes to non-communicable diseases and cancer, we have already engaged in the following important activities:

- We successfully recruited and funded the full salary and benefits of a senior specialist for three years and ten months, who worked on projects to support the Ministry of Health, thanks to donations from our partners. This effort was instrumental in helping Ethiopia develop its first cancer control plan. As a result the Ethiopian government allocated a significant budget for establishing large cancer centres at the universities of Mekele, Gondar, Jimma, Hawassa, and Haromaya. The plan also enabled 1,300 health centres to provide comparatively free cervical cancer screenings and treatment, as well as free cervical cancer vaccinations for 14-year-old girls.

Additionally, six radiotherapy treatment machines were purchased, each costing no less than ETB 200 million.

- The society played a pivotal role in helping Ethiopia develop a plan for controlling childhood cancer.

- The centre made significant contributions to Ethiopia by adopting strict legislation and regulations regarding the use of alcohol and tobacco.

- Through close collaboration with the Ministry of Health and other partners, we have supported Ethiopia in developing and publishing its inaugural research-based report on Non-Communicable Diseases (NCDs).

- The society has collaborated with the Ministry of Health, regional health bureaus, and other partners to prevent and control lung cancer. As part of this initiative, 15 lung cancer treatment rooms at Tikur Anbessa Specialized Hospital have been fully renovated, and a bronchoscope and EBUS, the first of its kind in Ethiopia, have been purchased and delivered. Additionally, approximately seven different research studies are underway to enhance the capacity of health institutions in the Oromia, Amhara, Afar, and Addis Ababa regions. The first phase of this project, which lasted three years, has been completed, and the second phase has just begun and is set to last for two years.

- In collaboration with the Ministry of Health and Regional Health Bureaus, we have successfully implemented the first phase of the Ethiopian PEN-Plus implementation Demonstration Project for chronic care of severe non-communicable disease (NCDs) at the primary hospital level. The first phases took place at Muketuri Primary Hospital in Oromia and Addis Zemen Primary Hospital in Amhara where we constructed, furnished and provided services through the PEN-Plus clinics.

- In collaboration with the Ministry of Health and other partner organizations, we are implementing a project aimed at advocating for the passage of a comprehensive and mandatory food policy to promote healthy diets and combat non-communicable diseases in Ethiopia.

- The society collaborated with the Ethiopian Ministry of Health and regional health bureaus to establish clinics for the examination and treatment of non-communicable diseases in primary hospitals. Two clinics have been built: one in Muke Turi, Oromia Region, and the other at Addis Zemen Hospital in the Amhara Region. This project, funded by PEN Plus and carried out in partnership with Harvard University, is the first of its kind in Ethiopia, with plans to expand to additional regional primary hospitals under consideration.

- In addition, we are working on a new initiative focusing on nutrition and related problems.

**Question:** What specific actions are being taken to support cancer patients?

**Answer:** Our organisation works to directly support cancer patients and their families. To achieve this, we actively fundraise through several initiatives including organising sponsorships, hosting walking events, participating in community bazaars, and collecting donations from individuals and organisations. A big portion of these funds is used to purchase and deliver essential cancer medications and other vital support to our beneficiaries. We have so far assisted over 3,000 cancer patients and their families and are currently supporting 175 cancer patients and their families. The points that follow are some of the direct services that we provide to our target beneficiaries and their families:

- **The society covers the full cost of round-trip transportation for individuals requiring medical treatment outside their area of residence.**
- **If prescribed medications are unavailable at hospitals, the society will cover the entire cost of purchasing them from private pharmacies.**
- **The society finances the full expenses of necessary diagnostic and laboratory services at private institutions when these services are unavailable at hospitals.**
- **Patients receive a monthly stipend of ETB 1,000 during their hospital stay to assist with miscellaneous expenses.**
- **Young patients attending school during their treatment receive a monthly stipend of ETB 1,000.**
- **Our 24-bed Phangisile Psychosocial Support Center provides free meals (breakfast, lunch, afternoon snack, and dinner) to the patients and their families.**

## The Principal Achievements of Our Society and Its Acknowledgements

**Question:** What are the society's major contributions, and how has it been recognised?

**Answer:** We are working on a project to provide medical treatment and care for non-communicable diseases at primary hospitals. Our primary focus is not direct patient aid, but rather encouraging the government to prioritise and adequately fund these sectors to facilitate significant reform. Despite non-communicable diseases accounting for over 52% of all deaths in the nation, less than 30% of healthcare funding is allocated to them. While the Mathiws Wondu-YeEthiopia Cancer Society has garnered international recognition with two local and five international awards from esteemed organisations like the United Nations, the World Health Organization, and the International Cancer Group, its domestic visibility remains limited. Self-promotion for domestic awareness is discouraged, and partly attributed to cultural influences. Originally a home-based organisation, our society has evolved into a full-time entity with 30 personnel. Our team includes two doctors, 13 individuals with master's degrees, and six with undergraduate degrees. We have a membership of 1,400 registered members and the support of over 500 volunteers. Due to a lack of recognition by the government and other relevant organisations and institutions, we are currently forced to pay daily ETB 8,000, monthly ETB 240,000, or annual ETB 2.8 million for house rent. This circumstance puts us at risk and jeopardises our society's survival, creating an uncomfortable environment for our patients and employees.

**Question:** You haven't yet sold away your reputation, as you have said. Does this have a detrimental effect on society's growth?

**Answer:** This situation has had a detrimental impact on our organisation. I must take responsibility for this. My family and I have always adhered to the belief that 'good work speaks for itself.' This principle, while well-intentioned, has hindered our progress. Organisations established after us have benefited from land donations and secured local funding. They have also garnered the attention of high-ranking government officials and prominent figures. In contrast, the only high-level official to visit us was the former First Lady, Mrs. Roman Tesfaye, to whom we express our sincere gratitude. Despite recognition from the Ministry of Health, the Food and Drug Administration Control Authority, and the World Health Organization, our work remains largely unknown to our local communities. This lack of public awareness has significantly impacted our ability to secure more local support. We have hired a qualified candidate and are prepared to make substantial progress to bridge the gap.

We have begun discussions with the Addis Ababa City Administration about acquiring the land that will allow us to establish modern and advanced facilities that would enable us to provide comprehensive medical services. We believe our long-standing request for land will get a positive response soon because the Addis Ababa Municipal and Health Bureaus are already working together to support our society.

**Question:** What are your plans for the future?

**Answer:** Our next major long-term goal is to establish the "Healthy Africa" Center of Excellence. This centre aims to address the critical issue of inadequate healthcare access in Africa, where individuals often face significant financial burdens and even risk their lives due to the lack of accessible and affordable medical care in their hometowns. The "Healthy Africa" Center will offer a unique approach to healthcare. While providing high-quality medical treatment and support for those who can afford it, it will prioritise sponsorship care for those who cannot. Furthermore, the centre will emphasise proactive disease prevention and control, aiming to intervene before illnesses arise and impact individuals. The centre will encourage early medical intervention for all patients, providing comprehensive treatment and care until they achieve full recovery. The Center will collaborate strongly with government entities, non-governmental organisations, and the public, particularly engaging with influential and affluent individuals. We believe this collaborative approach will significantly contribute to successfully treating non-communicable diseases within the country. Our immediate focus is on achieving our short-term goal: to raise community awareness about non-communicable diseases. We are actively working to develop and implement strategies that effectively educate the public on these critical health issues.

## Non-Communicable Diseases and the Role of the Society

**Question:** It is stated that a significant issue facing non-communicable diseases in our country is a lack of healthcare expertise. What approach are you planning on taking to address this issue? Furthermore, how do you manage the problems with medicine distribution and price inflation?

**Answer:** Ethiopia suffers significant economic losses due to non-communicable diseases, with an estimated annual cost exceeding ETB 31 billion, equivalent to 1.8% of its GDP. Despite this substantial burden, the allocation of resources for non-communicable disease treatment remains inadequate. Our immediate priority is to advocate for increased government attention and investment in this critical sector.

During a previous visit to India, we engaged with a medical institution to explore strategies for enhancing healthcare professional training. A major challenge facing the Ethiopian healthcare system is a critical shortage of medical professionals. Furthermore, the working environment in the country has created a hindrance by posing a challenge to the effectiveness of existing healthcare professionals. Addressing the issue of inadequate compensation for medical professionals is also crucial to ensure a motivated and effective healthcare workforce. Ethiopia devotes a significant amount of its limited resources to professional training and educational opportunities; nonetheless, these specialists leave Ethiopia in substantial numbers in pursuit of better lives elsewhere. For instance, the USA-based non-profit organisation "People to People," which granted us an award in 2017, employs over 5,000 Ethiopian physicians, technologists, and engineers. It would be possible to give reliable medical care from year to year if these specialists could visit their motherland once a year and volunteer for short periods or during vacations. If their travel and lodging costs are paid for this kind of volunteer work, many are happy with volunteering their expertise for free. We are presently debating on these plans.

**Question:** Non-communicable diseases are starting to become a problem in our country these days. According to one of your reports, NCDs cause 52% of all deaths in the country each year. Could you please explain the reason?

**Answer:** Non-communicable diseases are primarily caused by a combination of lifestyle factors, including advanced age, unhealthy diets, obesity, physical inactivity, and the use of addictive substances such as alcohol, tobacco, and khat. The modern lifestyle, characterised by readily available processed foods, contributes significantly to the rise of obesity. These lifestyle factors increase the risk of developing chronic conditions such as diabetes, hypertension, heart disease, and other related health problems. The alarmingly high rates of tobacco, alcohol, and khat consumption within our country further exacerbate the issue. For instance, tobacco smoking is a major risk factor for lung cancer, a particularly devastating disease. The other dreadful disease impacting women in our country is cervical cancer, which is mostly caused by the Human Papilloma Virus and can be transmitted easily through unprotected and promiscuous sexual interactions. In general, adequate research and examination of every one of these diseases is essential.

**Question:** You are one of the active organisations that have urged the Council of Peoples Representatives to adopt strict regulations and legislation around the usage of alcohol and tobacco. If you were successful in persuading the government to pay much attention, why aren't you applying similar influence on concerns regarding drug distribution and inflated prices?

**Answer:** Several national health-related challenges affect everyone. Large, sustained financial outlays are necessary for addressing non-communicable diseases. A patient with cancer, for instance, would need to have at least ETB 100,000 annually to receive complete, long-term treatment. Despite the government's limited resources, significant progress in addressing non-communicable diseases can be achieved through strategic and focused interventions. While acknowledging the government's constraints, it is crucial to recognise that non-communicable diseases currently pose a more substantial threat to public health than communicable diseases. These diseases not only pose a serious health risk but also impede overall national development. Therefore, it is imperative to prioritise the prevention and control of non-communicable diseases through timely and effective interventions. The fight against non-communicable diseases requires a multi-pronged approach, with the government's efforts complemented by the support of humanitarian organisations and the international community. Recent developments in government initiatives demonstrate a promising commitment to addressing this critical issue. For instance, establishing a Center of Excellence for Cancer at St. Paul Hospital signifies a significant step forward. Furthermore, the construction of cancer centres in five major cities across the country expands access to specialised care. To fight cervical cancer, the government has made significant progress by procuring 1,300 pieces of cryotherapy equipment. Additionally, six pieces of radiotherapy equipment have been acquired, three of which are currently operational. However, it is concerning that the remaining three radiotherapy machines remain idle.

**Question:** To what extent do you collaborate with other organisations to address non-communicable diseases and cancer?

**Answer:** The Consortium for Non-Communicable Disease (NCD) Office in Ethiopia is currently housed within our organisation. As the Consortium Coordinator, I volunteer my time to manage its daily operations, working alongside a dedicated team of colleagues. The Consortium was established through a collaborative effort with the Ethiopian Association for Diabetes, the Ethiopian Cancer Association, the Association for Heart Diseases, and the Association for Kidney Diseases. Despite its crucial role, the Consortium continues to operate with limited resources, facing challenges with insufficient personnel, office space, and funding.

Our Society plays a pivotal role in coordinating, supporting, and enhancing the capabilities of these associations. We are currently exploring the establishment of a coordinating network to facilitate future collaborations with other cancer-related organisations, including Tesfa Addis Parents Children Cancer Organization (TAPCCO) and Alem Fire Pink House Cancer Foundation. We anticipate the formal authorisation of this network shortly.

**Question:** Finally, I'll allow you to add anything in addition to what you believe needs to be stated.

**Answer:** I've had the opportunity to travel extensively, visiting countries across six continents. Ethiopia stands out as a truly remarkable destination. While some regions have extreme temperatures, making travel challenging, Ethiopia has a pleasant climate and natural resources abundance. Furthermore, I believe in the transformative power of turning personal challenges into opportunities for positive impact. This principle can be applied to various situations, including those that initially affect only one family. The lack of unity and collaboration among us has hindered the development of our nation. While we strive to fight non-communicable diseases and improve the health of our citizens, this effort requires a collective approach. Health institutions play a crucial role, but we all have the responsibility to contribute. By actively educating and raising awareness within our families, schools, workplaces, and communities, we can empower ourselves and build a healthier, wiser, and more prepared society. Raising public awareness of non-communicable diseases (NCDs) is crucial, and the mass media plays a vital role in reaching and influencing communities. At present, we are fortunate to have effective and safe preventive measures for NCDs, allowing individuals and families to significantly enhance their health. To this end, we are committed to public education through our website and social media platforms, empowering individuals with the knowledge and tools to make informed health choices. As we celebrate our Society's 20th anniversary, we invite the community, government, non-governmental organizations, and private entities to join us in commemorating this milestone. We eagerly welcome your support and collaboration as we continue to work towards a healthier future for all.

As we mark the 20<sup>th</sup> anniversary of our society, we remain committed to providing effective, cost-efficient strategies for preventing non-communicable diseases (NCDs). With the guidance of almighty God, we aim to empower our community to protect themselves and their loved ones, ensuring a long and healthy life. To achieve this goal, we focus on education and awareness through our website and social media platforms.

We invite our community, governmental and non-governmental organizations, as well as private entities to join us in celebrating this significant milestone and to support our mission. We humbly request all stakeholders and community members to collaborate with us in this important endeavor.

**TOGETHER, WE CAN MAKE A DIFFERENCE.**



## **Programs Director, Mathiwos Wondu-Ye Ethiopia Cancer Society**

**Mr. Zelalem Mengistu**

I have been a dedicated member of this organisation for the past ten years. As widely known, its founding stems from the tragic loss of Mathiwos and the inspiring vision of his parents. Driven by their commitment and the support of others who shared their humanitarian goals, the organisation has reached its 20th year of service. During its years of operation, the organisation has demonstrated significant progress. Before my arrival, its focus was solely on supporting children with cancer. This included raising cancer awareness and providing various forms of support to patients. The organisation also collaborated with the government to assist with cancer-related initiatives. Furthermore, it played a crucial role in raising awareness and providing training on the health risks associated with tobacco use.

These early years were challenging, characterised by limited trained personnel and insufficient funding. Most activities and projects were carried out through the dedication of individuals and voluntary contributions.

**In 2006, following the development of our programs, we gained access to the American Cancer Society's project and subsequently initiated the Bristol Myers Squibb Foundation (BMSF) project.**

**Recognising the importance of tobacco control, the Campaign for Tobacco-Free Kids (CTFK) organisation expressed interest in collaborating with us on a policy-focused project. This collaborative effort culminated in the issuance of the country's new Tobacco Proclamation No. 1112. At that time, the Programs Department had a limited staff of only two project officers.**



The funding provided initially from BMSF was primarily focused on institutional capacity building. This enhanced the ability to monitor and carry out projects and allowed resources to be used effectively and efficiently. After that, multiple projects began to arrive. These developments facilitated collaboration among key stakeholders, including the Food and Drug Administration and Control Authority, regional health bureaus, the Ministry of Health, and other government agencies.

Furthermore, the timely initiation of the BMSF program, which focused on female breast and cervical cancer, proved to be highly advantageous. When we received the first round of capacity-building funds from the Africa Capacity Building Foundation (ACBF), our financial capacity increased, allowing us to hire more personnel and expand our entire activities. Our reach extended beyond Addis Ababa to other regions, and our growing reputation led to increased project involvement. As the organisation gained a reputation, our participation in projects began to expand. Concurrently, the number of our target beneficiaries (cancer patients and caregivers) increased, and collaborative relationships developed. We have started a close collaboration with the Ministry of Health and other professionals.

All, the organisation's operational manuals, were amended, and the strategic plan was revised and improved. The organisation was able to expand the scope of its activities in the sector of non-communicable diseases as a result of these advancements.

Currently, only our name is described as a cancer society. The COVID-19 pandemic presented significant challenges for our organisation and our partners. However, we have successfully navigated this period by adapting to remote work arrangements. In the aftermath of the pandemic, we refined our strategies to prioritise non-communicable diseases, resulting in remarkable achievements in this area.

Our successful lung cancer initiative has enabled us to expand our focus to other related cancers. Recognising the importance of collaboration, we now actively partner with other organisations on various projects. By leading these collaborative efforts, our society gains valuable recognition and strengthens its impact.

**We are now working on non-communicable diseases in two regions of the country as our top priority, concerning to for the PEN-Plus Project. The project addresses health issues that could arise from non-communicable diseases through the Addis Zemen and Muke Turi primary hospitals in the Amhara and Oromia Regions respectively. The effort to bring this project from its current limited regional scope to a national scale has already begun.**

The organisation has played a significant role in supporting and strengthening the Group of Non-Communicable Diseases (CNCDA) team. A notable achievement is the successful implementation of Proclamation No. 1112/2011. Furthermore, our organization played a crucial role in the modification of the nation's excise tax regime.

**Currently, we are actively managing eight projects. Our collaboration with CTFK continues to be a valuable partnership. We have successfully progressed to the third phase of our projects with ACBF. The Multinational Lung Cancer Control Project (MLCCP) is currently in its second phase. We are also advancing another project focused on nutrition policy. Furthermore, we have initiated a new lung cancer project and have established a collaborative agreement with AstraZeneca. However, we don't believe we have yet arrived at our desired destination, and so much more work remains to be performed to accomplish our ultimate goal.**

Due to limited funding, the Mathiwos Wondu-Ye Ethiopia Cancer Society's current NCD project requires broader collaboration with various other organisations and stakeholders. However, we have achieved significant success in our efforts thus far. Among our greatest successes is the policy on tobacco control. Given the fact that tobacco usage causes dangerous health risks to the general public, we view this as a positive development. Another significant achievement is our contribution to the development and implementation of the National Cancer Control Program (NCCP) in collaboration with the Ministry of Health. Furthermore, we have successfully initiated local fundraising efforts, distinguishing ourselves from other organisations, through our focus on influencing national policy changes and addressing related issues.

I am optimistic that in the coming years, we will significantly increase our focus on non-communicable diseases, which is an area of critical health concern. Currently, our projects often face budgetary constraints and have limited durations. However, I am confident that in the long term, we will be able to implement larger-scale initiatives and programmes that will have a profound and lasting impact on the nation's health sector.



## Operations Director of Mathiws Wondu-Ye Ethiopia Cancer Society

**Mr. Lemma Ayele Mekuria**

I am a senior member of the society's staff and have been with the organisation for over ten years. Operations encompasses all of an organisation's administrative responsibilities. It is an action that marks the beginning of an organisation's journey. It includes legal, financial, procurement, administration, human resources, and property management functions, among several others. As the organisation developed over time, so did its operations, which became more modern and enhanced.

For the first six years, Mathiws Wondu-Ye Ethiopia Cancer Society operated from the Mathiws's family residence. Despite serving a limited number of beneficiaries, the organisation managed to function. However, with only two individuals managing operations, challenges were inevitable.

There were no formal administrative structures, no well-organised documentation, and no standardised procedures for human resource management. Despite these initial obstacles, the organisation gradually expanded, laying the foundation for the respected and well-regarded institution it is today, recognised nationally and internationally.

The Mathiws Wondu-Ye Ethiopian Cancer Society is renowned for its exceptional work and unwavering commitment to ethical principles. This reputation aligns perfectly with the primary objective of the 18-month USAID training program aimed at enhancing organisational capacity. Significantly contributing to this success is the visionary leadership of Mr. Wondu Bekele, the Society's founder and CED. His unwavering support for innovation and encouragement to embrace new ideas and strategies have moved the organization to new heights.

As Mr. Wonda frequently emphasises, continuous improvement is key. Embracing the philosophy that



# THE LARGEST ROOM IN THE WORLD IS THE ROOM FOR IMPROVEMENT

has become a guiding principle for the organisation. When employees join the society with a dedicated spirit and a willingness to share their expertise, they contribute significantly to capacity building. By actively participating in training and readily sharing their knowledge with colleagues, they not only enhance their skills but also strengthen the organisation's overall capacity. This collaborative approach has been instrumental in our past successes, and will undoubtedly continue to drive our future achievements.

We have made significant advancements in our financial and technological capabilities. Our journey began with basic tools like Excel, progressed to Peachtree Accounting, and ultimately led us to adopt the International Public Sector Accounting Standards (IPSAS) for financial reporting. IPSAS, while not widely used in Ethiopia, is a testament to our commitment to international best practices and regulatory compliance. Our consistent use of IPSAS since 2019 for the past five years demonstrates our dedication to maintaining the highest standards in financial transparency and accountability.

We utilise these resources to enhance human capital, accelerate our learning, and acquire modern technology. We have successfully convinced our partners and donors to support these activities, which has resulted in significant improvements in our performance and capabilities. Over the past five years, our society has garnered five international and two local awards, and our annual budget has experienced consistent growth. The society's progress can be divided into three distinct phases, each spanning approximately six years. The first six years were formative, characterised by minimal administrative expenses as the foundation of the organisation was in the process of being laid. The subsequent six years witnessed significant growth in human capital, with a strong emphasis on enhancing the skills and expertise of our team.

The current phase is marked by the ability to successfully acquire and utilise diverse foreign assistance and donations to support a wide range of projects. This evolution has significantly strengthened our operational and program management capabilities. We now have a highly skilled team comprising health specialists, nutritionists, finance professionals, and human resource experts, an achievement that continues to inspire the founders and all of us.

The credibility earned through our work has facilitated collaborations with esteemed organisations like Amref Health Africa and Doctors with Africa CUAMM on the international stage. Locally, we partner with Indigenous organisations such as Mary Joy and non-communicable disease associations. When recruiting, we prioritise candidates who not only meet the necessary qualifications but also demonstrate dedication and loyalty to the organisation's mission. This helps create a strong sense of belonging among our employees. Furthermore, the society actively supports initiatives with the aim of enhancing compensation and benefits packages for our valuable personnel.

The society is dedicated to providing the highest level of support and medical care to its beneficiaries. It assists beneficiaries residing outside of Addis Ababa. This commitment extends beyond the project timeframe, ensuring that patients with breast and cervical cancer receive ongoing support even after specific project phases conclude. Treatment initiated during a project is often continued through alternative funding sources within the organisation, demonstrating a commitment to "full and sustainable" support. This comprehensive approach includes compassionate assistance with funeral expenses in their hometowns for patients who have passed away.

Our society is embarking on an ambitious new initiative called "Healthy Africa," aiming to expand its impact beyond Ethiopia to neighbouring African countries. This initiative focuses on addressing non-communicable diseases by providing comprehensive services, including professional medical treatment, care, and rehabilitation to all individuals in need. Recognising that non-communicable diseases not only pose significant health challenges but also hinder economic growth, "Healthy Africa" seeks to improve access to quality healthcare within local communities. Strengthening local healthcare systems, this initiative will contribute to a more robust and sustainable national healthcare infrastructure, ultimately reducing the need for expensive medical treatments abroad and conserving valuable foreign exchange.

The "Healthy Africa" project necessitates the acquisition of land, which will be facilitated through government support. Once the land allocation process is finalised, the project implementation can commence with the dedicated project team assuming full responsibility. We are pleased to announce that numerous international and local entities have expressed their strong interest in collaborating on this ambitious endeavour. With God's grace, we urge everyone to lend their support to this monumental project initiative.

# Healthy Africa

A Project to  
Establish a Center  
of Excellence in Ethiopia

Non-communicable diseases, such as cancer, were once primarily associated with developed countries. However, these diseases are becoming increasingly prevalent in developing nations as well. Epidemiological data reveals that cancer is the leading cause of death in developed countries, and a similar trend is emerging in developing countries.

The good news is that a significant portion of non-communicable diseases can be prevented. By adopting healthy lifestyle habits, it's possible to avoid approximately 80% of heart, kidney, hypertension, and diabetes-related issues, as well as 40% of cancer-causing risk factors. Driven by the conviction that no one should suffer from preventable diseases, and intending to prevent and control non-communicable diseases our society is actively planning and working towards the establishment of the visionary "Healthy Africa Excellence Center." This centre will serve as a hub for specialised care and treatment, providing accessible and high-quality healthcare services within the region. The successful realisation of this ambitious project will require the collaborative efforts of governmental and non-governmental organisations.

The primary objective of this project is to effectively address the increasing burden of non-communicable diseases at a national level. This will be achieved through a multi-pronged approach: 1) enhancing public awareness and promoting healthy lifestyles to prevent NCDs; 2) improving early detection and diagnosis through enhanced screening programs and accessible healthcare services; and 3) implementing cost-effective interventions such as community-based programs and telemedicine initiatives.

By prioritising these strategies, the project aims to reduce the need for costly medical treatments abroad, thereby significantly saving hundreds of millions of dollars in healthcare expenditures and improving the overall health and well-being of the Ethiopian population.



The feasibility study draft underwent a rigorous analysis, process drawing insights from multiple perspectives. This iterative process ultimately refined the draft to a point where it could effectively support the project framework. To secure land for project implementation, we submitted all letters of support and recommendations received from our partners and relevant government offices to the Addis Ababa City Administration.

Following a thorough review by various city departments, our application was approved and subsequently, forwarded to the Land Management department. We are optimistic that our land allocation request will be granted.



CENTER OF EXCELLENCE



PSYCHOSOCIAL SUPPORT CENTER



HOTEL



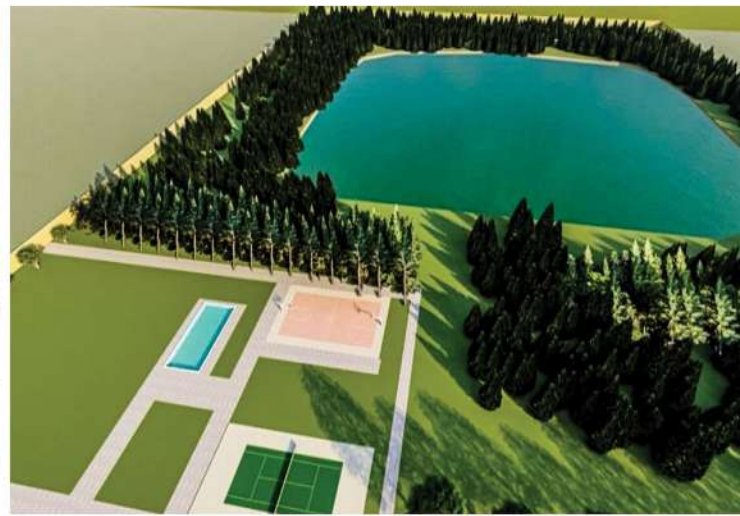
Offices



Addiction Rehabilitation Center



Research Center



Forest, Lake and Outdoor Sports Area

# Healthy Africa

A Project to Establish  
a Center of Excellence  
in Ethiopia

## The PEN-Plus Project

Non-communicable diseases (NCDs)—including diabetes, cancer, heart disease, and chronic respiratory infections—are rapidly rising in Ethiopia, posing a serious threat to public health and overall development. The 2018 World Health Organization (WHO) report on NCDs underscores the urgency of this issue, revealing that in 2016, NCDs accounted for 30% of the 700,000 annual deaths recorded in the country. This alarming statistic highlights the critical need for effective prevention and control strategies.

The PEN Plus project, inspired by the UN/WHO PEN initiative, is implemented and supported by the NCDI Poverty Network through financial and technical assistance. Its primary goal is to empower primary-level hospitals by equipping them with the necessary resources to deliver essential healthcare services. The project aims to ensure the delivery of high-quality medical care for major health concerns, including heart disease, hypertension, and both type 1 and type 2 diabetes. A key focus is coordinating and strengthening the network with existing health centres to provide comprehensive and accessible healthcare services across the sector.

This initiative is carried out by the Mathiwos Wondu-YeEthiopia Cancer Society (MWECS) in collaboration with the Ethiopian Ministry of Health including the Oromia and Amhara Health Bureaus. It prioritises providing life-saving care for chronic NCDs at first-level rural hospitals. Currently, the PEN Plus project is being implemented at Muke Turi Primary Hospital in the Oromia region and Addis Zemen Primary Hospital in the Amhara region. Due to the project's demonstrated impact and effectiveness, plans to scale up its implementation at the national level are in the final stages.

# KEY DESCRIPTIONS OF THE MAIN PROJECTS

## Multinational Lung Cancer Diagnosis and Control Project/MLCCP

Lung cancer remains a significant global health burden, claiming the lives of 1.8 million individuals annually. This represents a substantial 18.4% of all cancer-related deaths worldwide. In line with this, Ethiopia has witnessed a concerning rise in lung cancer incidence.

### The main reasons for starting this project are:

- The lack of comprehensive and reliable epidemiological data on the prevalence and trends of cancer within the country.
- The absence of comprehensive cancer control programs and the capacity to effectively implement them.
- The late diagnosis and initiation of treatment often occurring only when the disease has progressed to advanced stages.
- The high number of employees exposed to various chemicals in their workplaces leads to an increased risk of developing lung diseases, which are often misdiagnosed as tuberculosis, leading to inappropriate medication and management.

The primary objective of this initiative is to improve access to examination and medical treatment services for individuals with pre-existing lung cancer in Addis Ababa, Oromia, Amhara, and Afar regions.



Implemented over three years from June 2020 to May 2023, the project is being carried out with organisations such as the Ethiopian Thoracic Society, Amref Health Africa, Doctors with Africa CUAMM, and Mary Joy Ethiopia. The initiative has successfully reached 156,306 patients directly and impacted an additional 798,823 individuals, indirectly. Following the successful completion of the first phase, management has been handed over to MWECS, the Ethiopian Ministry of Health, and regional health bureaus. The second phase of the project began in the first quarter of 2024.

## Initiative for Lung Cancer Care (ILC2)

This project is generously supported by the AstraZeneca Lung Ambition Alliance initiative, which aims to enhance lung cancer control and treatment through evidence-based approaches and expert professional guidance. Key objectives include the development of multidisciplinary teams and new professional groups, empowering healthcare professionals with comprehensive training and support, enhancing patient self-sufficiency and resilience in managing the challenges of lung cancer, and providing psychosocial support for patients, their families, and caregivers.

The primary objective of this project is to strengthen the multidisciplinary teams at five prominent university hospitals: Tikur Anbessa Specialized Hospital, Jimma University Medical Center, Hawassa University Comprehensive Specialized Hospital, University of Gondar Specialized Hospital, and St. Paul's Millennium Medical College Hospital. By enhancing the capabilities of these teams, the project aims to improve the quality and effectiveness of medical treatment and support for lung cancer patients. The project's implementation phase will run from June 2023 to May 2025.

## Activities related to Cervical and Breast Cancer

The society provides comprehensive psychosocial support services, including assistance with meals, transportation, medications, and medical treatment costs for cervical and breast cancer patients. The society offers essential healthcare and life skills training programmes designed to improve health awareness and understanding for patients and their families at its Phangisile Psychosocial Support Centre.

This supportive environment creates open communication, allowing patients to share freely their thoughts and concerns. By addressing the challenges faced during their treatment journey, the society empowers patients to adapt and create a healthier environment for their well-being. The centre additionally offers critical health education on key topics such as adopting healthy lifestyles, preventing and controlling illnesses, and practising proper hygiene and sanitation. These health education programmes not only increase the knowledge of patients and caregivers but also enhance their overall well-being by encouraging the development of healthy habits while they are at the centre.

From 2014 to 2018, MWECS successfully implemented the Ethiopian Women's Cancer Project, focusing on cervical and breast cancer treatment and control, with funding from the BMSF. This initiative targeted communities in Addis Ababa, Oromia, and the Southern Nations, Nationalities, and Peoples' Region. In collaboration with Tikur Anbessa Specialized Hospital, the society provided crucial support to 128 underprivileged patients—110 with cervical cancer and 18 with breast cancer. This support included access to medical treatment, including various forms of assistance and accommodation at the society's centre.

The society continues to offer ongoing support to cervical and breast cancer patients who were previously treated at the psychosocial support centre, even after the conclusion of the BMSF-funded Ethiopian Women's Cancer Project. Since 2021, the society has celebrated World Breast Cancer Day annually using these events to raise awareness and conduct valuable training programs.

## Tobacco Control Projects

Tobacco use, including smoking cigarettes, pipes, and hookahs, as well as chewing and nasal inhalation poses significant health risks. Nicotine, a highly addictive substance found in tobacco, can severely damage the heart and respiratory system. Tobacco use is a leading cause of over 20 types of cancer and other non-communicable diseases, resulting in an estimated 8 million deaths worldwide each year.

Countries with high rates of tobacco production, distribution, and consumption bear the burden of tobacco-related deaths. Tobacco addiction not only harms individual smokers but also poses significant health risks to non-smokers exposed to secondhand smoke. Annually, tobacco use tragically claims the lives of 1.2 million individuals worldwide, contributing significantly to a wide range of health problems.

Tobacco use imposes a staggering global economic burden, estimated at 1.4 trillion dollars annually, representing 1.8% of the world's GDP. Developing countries disproportionately bear the lion's share of this burden, facing significant health and economic challenges due to tobacco use. Recognising the serious concerns surrounding tobacco production within our country, the society is engaged in various tobacco control programs in collaboration with the Ethiopian Food and Drug Authority and other key partners.

## **Tobacco-Campaign for Tobacco-Free Kids /CTFK/ Supported**

The Campaign for Tobacco-Free Kids (CTFK) is a key partner of MWECS, one of its collaborating organisations. CTFK played a significant role in the successful enactment of Ethiopia's comprehensive tobacco control legislation on February 5, 2019. This legislation is a landmark among the strongest in Africa, which prohibits and strictly regulates tobacco use, establishing an important precedent for other African nations in the battle against tobacco.

The CTFK provides crucial financial and technical support to MWECS and other organisations dedicated to tobacco control. This support empowers these organisations to enhance their technical capacity, build their organisational strength, and effectively address the multifaceted challenges of tobacco use within their respective communities. Following the ratification of the Tobacco Control Law by the Ethiopian Constitution, CTFK continued its collaboration with MWECS. From January 1, 2021, to June 30, 2022, CTFK funded an 18-month project focused on enhancing the understanding and implementation of the Tobacco Control Law. Key activities included developing and distributing informative visual aids, such as warning labels and educational materials, to raise public awareness about

the dangers of smoking, and providing guidance and support to stakeholders on translating the legal framework into practical and enforceable regulations.

Our current project is set to run from January 1<sup>st</sup>, 2024, to December 31<sup>st</sup>, 2024 for one year. The primary purpose of this project is to collaborate with the Ethiopian Food and Drug Administration Authority to develop and disseminate the third-round visual health training awareness materials. These materials will be distributed to federal and regional levels, including Addis Ababa, Dire Dawa, and Afar. The ultimate goal is to support the development of effective procedural guidelines for the implementation of tobacco control legislation, with a primary focus on establishing smoke-free environments in Addis Ababa.

## **Tobacco -African Capacity Building Foundation/ACBF/ Supported**

Since 2016, the African Capacity Building Foundation (ACBF) has provided essential funding to MWECS for its Community Awareness and Smoke-Free Environment (SFE) Initiative. This initiative is part of a broader regional effort targeting selected African nations, aiming to strengthen the capacity of civil society organisations, including MWECS, to advocate for and support the implementation of tobacco control policies in Ethiopia. By tackling key challenges and obstacles, the initiative seeks to enhance the sustainability and effectiveness of tobacco control efforts in the country.

The African Tobacco Control Alliance (ATCA) is a Pan-African network of more than 120 civil society organisations dedicated to combating the tobacco epidemic. ATCA supports various initiatives, including a critical project that monitors and addresses the tobacco industry's interference in tobacco control efforts across the continent. Additionally, ATCA supports more than 120 national fundraising initiatives led by civil society organisations, functioning as a collaborative African network. The Tobacco Industries' Monitoring Feedback Project Initiative has been funded by the African Tobacco Control Alliance (ATCA).

Since 2021, some of the activities implemented cover the following:

- Organizing quarterly meetings.
- Monitoring and reporting on tobacco-related interferences, such as advertisements, illegal importation of contraband goods, government agreements, recognitions, and related activities in websites, media, and the press.
- Creating promotional items such as brochures, posters, booklets, and pamphlets.
- Engaging in efforts grounded in accurate and reliable data to support the implementation of the legislation.
- Publishing articles and stories that reveal the movements and tactics of the tobacco industry.

This project consists of two phases: II and III. ABCF Project Phase II aims to assist the government in making Addis Ababa "smoke-free." It also focuses on strengthening and consolidating tobacco control efforts in densely populated areas to address gaps in rule and regulatory implementation. At the national level, the project is developing strategies to closely monitor and mitigate the negative impacts of the tobacco industry while preventing its appealing tactics.

The primary objective of the ABCF Phase III Project is to support MWECS in achieving its tobacco control mission. To fulfil this goal, it would be necessary for resources and assistance to be provided to enhance organisational capacity and staff capabilities. Given the society's extensive experience in Ethiopian tobacco control, its efforts have the potential to be sustainable and contribute to strengthening the implementation of tobacco control legislation and regulations for more effective and positive outcomes. This project will be carried out from January 2023 to December 2024.

## Childhood Cancer Treatment Activities

Childhood cancer is the primary inspiration behind the foundation and ongoing operations of MWECS. At its Phangisile Psychosocial Support Center, the society provides those children with cancer various forms of assistance, including transportation, food, and accommodation. Additionally, they receive support for medical examinations, medications, and milk to boost their immunity during treatment.

The centre also offers a petty cash allowance of ETB 1000 for hospital stays and support for certain children attending school including, coverage for school materials and a monthly financial contribution of ETB 1000 to help with school fees and related expenses.

The society provides a variety of facilities and games for both indoor and outdoor use. Currently, 43 children are receiving support from the organisation. Recently, it has equipped the Pediatric Cancer Ward at Tikur Anbessa Specialized Hospital with 16 television sets with stands, 4 computers, wheelchairs, beds, trolleys, suction equipment, and stoves. Additionally, renovations have been completed for the Cancer Center and 15 other rooms. Meanwhile, the Lung Cancer Treatment Center has benefited from 15 newly renovated rooms - a Bronchoscopy, and EBUS equipment, the first of its kind in Ethiopia.

## Food Policy Support in Ethiopia

Data indicates that nutrition policies are highly effective in preventing and controlling non-communicable diseases making their impact significant. Ethiopia needs to strengthen its nutrition policy given the rising challenges posed by both non-communicable and communicable diseases. The Global Health Advocacy Incubator (GHAi) has provided MWECS with technical and financial support for a project aimed at helping Ethiopia develop, implement, and enforce legislation against unhealthy nutrition. This initiative is expected to benefit 110 million citizens by promoting healthy diets and generally prohibiting the endorsement of harmful food policies.

A diverse group of participants and collaborators are brought together to ensure the project is effective and, has a meaningful impact on the community. This includes the Ethiopian Ministry of Health, the Ethiopian Food and Drug Administration Authority, the Ministry of Justice, the Office of the Cabinet, the Council of Peoples Representatives, various government ministries, the World Health Organization, and the Ethiopian Civil Society Organizations Council. The project aims to prevent and control non-communicable diseases.

# Fertuna News Regarding the Celebration of the 20<sup>th</sup> Anniversary

In celebration of the 20th anniversary of the Mathiws Wondu-YeEthiopia Cancer Society, awareness training and screenings were conducted at various institutions during Breast Cancer Month.

At Tikur Anbessa Specialized Hospital, the Ethiopian New Year 2016 was celebrated by the Mathiws Wondu-YeEthiopia Cancer Society with cancer patients and their families bringing them immense joy.



On September 13, 2016, journalists received a press release commemorating the 20th anniversary of Mathiws's passing.



In commemoration of the 20th anniversary of the Mathiws Wondu-YeEthiopia Cancer Society, Fana Television hosted a memorial gathering for the late artist Zenebu Gessesse, who passed away from breast cancer.



At Tikur Anbessa Specialized Hospital, the Mathiws Wondu-YeEthiopia Cancer Society celebrated the birth of Jesus Christ alongside cancer patients and their families.



The Christmas gift-giving event for the Mathiws Wondu-YeEthiopia Cancer



The Christmas gift-giving event for the Mathiws Wondu-YeEthiopia Cancer Society. The Mathiws Wondu-YeEthiopia Cancer Society extends its heartfelt gratitude to the parents and the 82 volunteer students who contributed ETB 330,000, raised during the 2015 (E.C.) summer program.



Christmas festivities with cancer patients and their families at Mathiws Wondu-YeEthiopia Cancer Society.



In celebration of the Christmas holiday, the young Fraol Tefera and his friends hosted a lunch buffet at Mathiws Wondu-YeEthiopia Cancer Society.



Students from One Planet International School and the Abune Gorgorios Aware Branch visited the Mathiws Wondu-YeEthiopia Cancer Society and made donations during their visit.



Mathiws Wondu-YeEthiopia Cancer Society successfully held its 18th General Assembly Meeting.



The highly anticipated weekly broadcast of the radio program on Fana FM 98.1 has officially begun.



Professional photographer Mulat Abera organized the "Destiny" photo exhibition, announcing that all proceeds will support the Mathiws Wondu-YeEthiopia Cancer Society.



Mrs. Tiruwork Yigezu's yearly Memorial was hosted by the Mathiws Wondu-YeEthiopia Cancer Society.



The Mathiws Wondu-YeEthiopia Cancer Society has hosted the centennial memorial for Mr. Aynalem Abraha.



# A Father's Heart for His Child, The Sole Child of His Parents



Lemma is the only child in his family, with no siblings born before or after him. This situation created an environment of empathy for Lemma Legebo, who often felt the weight of his solitude. His mother suggested a different path when he finished primary school and was about to enter ninth grade. She encouraged him to drop out, get married, and start a family so that they could enjoy the joy of being grandparents. Lemma, wishing to honour his mother's wishes, agreed to her proposal.

As expected, following local customs and traditions, Lemma joyfully married at his parents' home. His beloved became his partner for life. Soon after, their marriage was blessed with a child. When Lemma held his son in his arms for the first time, his mother was overjoyed. As the child grew, he celebrated his first birthday and took his first steps, bringing immense happiness and fulfilment to his parents.

One day, an unexpected situation occurred when Lemma's five-year-old son fell seriously ill. The child was taken to Jimma Hospital, where he received the necessary medical treatment and ended up being hospitalised.

This turn of events was shocking and hard for Lemma to comprehend. His son was a precious gift, cherished by both him and his mother, and he brought immense joy to their lives. The medical treatment his son received was overwhelming, and the suffering and pain he endured were intense.

The medical examinations revealed that Lemma's son had meningitis, causing deep concern within the family. As the first two days of this difficult situation passed, it became clear that their efforts to improve his condition were unsuccessful. The little light in their home had extinguished, marking the end of his brief journey through life. The family was engulfed in immense sorrow and despair following the loss of their child.

Recognising the depth of Lemma's grief, they brought in elders to counsel him, encouraging him to regain his strength and move beyond his feelings of despair. Lemma took the time to reflect on and accept his situation. He poured his heart out to his Creator, seeking solace and guidance.

Gradually, he became more mindful, realising that while he couldn't change the past, he could focus on living in the present and holding onto hope for the future.

Lemma re-enrolled and continued his studies at the same level. With a solid background in education, he completed secondary school.

He then pursued a correspondence course at the university, earning a diploma in human resource management. After finishing his studies, he applied for and secured a government position. Soon after, he was nominated as the administrator of Tercha Town, a role he ultimately embraced. His diligence and dedication showcased his resilience. In addition to his official duties, he became a vital support to many in need of assistance.

Lemma's journey was far from over. He continued his education and ultimately earned a degree, which led to a position that allowed him to advance further in his career. His reputation as a devoted and trustworthy individual was reaffirmed. Gradually his accomplishments and appointments accumulated, his commitment deepened, but the roles he sought became increasingly competitive.



After careful reflection and discussions with his mother, he decided to leave his stable job to pursue a personal necessity and transition into a freelance professional consultant. Lemma is now a proud father of four children, enjoying a happy and peaceful family life. He holds deep respect for both his wife and his mother. As a caring and well-mannered household leader, he is immensely devoted to his wife. His fourth child was named Kibrealem, meaning "Glory of the World." Her arrival brought many beautiful changes, rewards, and joys into his life, inspiring him to choose this meaningful name for her.

## **Kibrealem . . .**

Kibrealem is currently seven years old. As the youngest and lovely and affectionate child, she is adored by everyone in the family. At present, she is in her second year of kindergarten. She is highly energetic and healthy with remarkable behaviour and interactions. Kibrealem dreams of becoming a doctor when she grows up. However, over time her father noticed something unusual about her appearance. When she returned home from school, her eyes appeared unusually red, raising his concerns and prompting him to wonder why. He struggled to find anyone who could answer his questions. Gradually, Kibrealem's skin became pale, resembling paper, which heightened the family's concern. Lemma decided to take her to a health clinic for a checkup. However, the clinic quickly referred her to a hospital, as her condition showed no signs of improvement. As she began receiving treatment at the hospital, Kibrealem's abdomen started to swell. Specialists soon determined that her spleen was the source of her problems. Consequently, she was referred to Jimma University Medical Center for further examinations and treatment. Lemma anxiously awaited the day when his child's treatment would be completed, allowing them to return home. However, as he soon discovered, that day was not close. The doctors requested his signature to proceed with a bone marrow examination for additional testing. Confused and seeking an explanation, he learned that the procedure would involve powerful anaesthesia and required parental approval. After understanding the situation, he had no choice but to sign the consent form.

The child was given anaesthesia but did not wake up as expected, filling Lemma with fear. Once the examination was completed, the diagnosis revealed that she had Leukemia or blood cancer. He was devastated by the news and sobbed uncontrollably. Although the costs for treatment were very high, the doctor recommended that the best course of action was to take her to Addis Ababa. Following this advice, he decided to make the journey. With the help and support of kind individuals, he carried his ill child into the Tikur Anbessa Specialized Hospital in Addis Ababa. With the help of the referral documents he was carrying with him, he was able to get his child admitted to the hospital and got through the bureaucratic process with ease. However, her treatment had to start over from the beginning, and unfortunately, the results continued to be the same as before.

## **A stranger to the people and a foreigner to the land**

Lemma had left his business and family behind, spending Ethiopian New Year 2015 (2023 GC) away from home. His daughter was slowly deteriorating due to her daily medical treatments. The effects of chemotherapy brought her pain and hardship for several months. Feeling like a stranger among the people and unfamiliar with his surroundings, Lemma had no close relatives to turn to for support.

He was constantly worried about his child's health. Despite the stress, he never disclosed any details about her medical condition to her mother. Now, he had reached a point where he was out of money and uncertain about what to do next. He was also informed that he needed to hand over the hospital bed to other patients. Holding back his tears, Lemma felt a deep sadness. It was a challenging time, and with his ill child, he didn't know where to turn for help.

Once he realised he had to check out of the hospital, he approached Dr. Tigist in tears, pleading for her to understand his desperate situation. Dr Tigist listened with empathy and offered him some guidance to help him navigate his challenges. He was grateful for her advice, but couldn't help questioning its accuracy. She referred him to the appropriate place. He began to praise God profusely when he learned about an organisation called Mathiwos Wondu-YeEthiopia Cancer Society that could assist his sick child. This organisation had a strong track record of support for families in need.

### **Currently,**

As the head of the household, Lemma stands by his child's side, heartbroken by the realisation that she is enduring the same suffering he faced as a child. His little girl is now in the fifth phase of chemotherapy, however, her treatment has been temporarily postponed due to signs that the cancer is affecting her liver, raising significant concerns. Her father, with no rest, who has been a role model for many devoted dads watches her every breath. Tomorrow holds great promise for him. He refuses to give up on his little girl until he sees her life revitalised. He is determined to persevere through it all.

# Life's Journey: From Libanos to Addis Ababa

## A Child from Libanos

The small kebele of Libanos is located in a rural area near Debre Markos, in the Gojjam Zone of the Amhara Region, Ethiopia. With no other means of livelihood available, work is essential for the residents. The rural farmers are seldom seen idle; instead, they tirelessly tend to their animals and cultivate their land, often singing ballads as they labour.

Little Alehegn was born and raised in the village of Libanos. His affectionate childhood was filled with promise, and he was an adorable child. Like his peers, Alehegn spent his early years caring for animals and playing in the fields. He has experienced laughter and tears, falling only to get back up throughout his childhood. As he grew older, his parents never denied him any opportunities. With compassion, they sent him to school to pursue an education. This little boy was filled with excitement as his dreams began to take shape. His family provided him with pencils and activity booklets to aid in his learning.

## "A Matter of a Leg..."

As time went on, one of Alehegn's legs began to swell. His parents hoped that eventually the swelling would subside and everything would return to normal. However, the swelling persisted. Soon, others began to form their own opinions about the situation after witnessing it firsthand. Many people speculated on the cause of his condition. Ultimately, it became clear that only a medical examination and tests could determine the true nature of his health issue.



Alehegn was admitted to the Libanos Health Center for a complete medical checkup. After the diagnosis, he was prescribed medications and injections. Unfortunately, the results did not meet expectations, instead, the swelling worsened and became more pronounced. As a result, Alehegn required a referral to Debre Markos Hospital. As soon as he arrived at the hospital, Alehegn's medical treatment commenced immediately. He spent several days as an inpatient, but there was no sign that the swelling was reducing. One day, the doctors reached a new conclusion: Alehegn needed to be referred to Bahirdar Hospital for further, more intensive evaluation and treatment. Without hesitation, his parents took him to Bahirdar Hospital, located in the main city of the Amhara region. Within a couple of days, Alehegn and his parents received a definitive diagnosis from the doctors. They confirmed that Alehegn's condition was due to cancer. At that moment, neither Alehegn nor his parents had any knowledge about cancer.

Once they learned the cause of his illness, they anxiously awaited information on the next steps for treatment. The hospital's medical board recommended that Alehegn be referred to Addis Ababa for further assessment and advanced treatment. This posed a significant challenge for his parents, as they lived in a rural village like Libanos and found it difficult to travel such a long distance from home.

## Guests from Libanos

Alehegn, an eleven-year-old boy, finally arrived in Addis Ababa after being diagnosed with cancer in his leg. His treatment at Tikur Anbessa Specialized Hospital was challenging and could not be completed quickly. He had to attend frequent appointments for various tests and examinations. After finishing the initial treatment regimen, he returned two weeks later for additional therapy. Chemotherapy is a key treatment for patients with cancer.

**Undergoing chemotherapy was not an easy experience. It took a toll on Alehegn's body, leading to hair loss and various psychological effects. He faced nausea, vomiting, discomfort, and an overall sense of depression.**

An unexpected guest arriving in Addis Ababa may encounter significant challenges. Finding accommodation, familiarising themselves with the area, and securing everyday necessities can be tough. Navigating the chaos of a large city is no small feat, especially when it comes to interacting with others and figuring out transportation—particularly for someone travelling from a distant rural village to care for a sick person. In such situations, having someone dependable—someone with courage and wisdom, like a friend or relative—becomes essential.

## **On One of Those Days ...**

After one of his routine chemotherapy appointments, Feeling extremely tired as usual, and unable to walk home, he decided to wait for the bus instead. Feeling as usual, extremely tired, and since he couldn't manage to, walk home, he chose to wait for the bus instead. The bus finally arrived as expected. Summoning all his strength, Alehegn climbed aboard and navigated through the crowd, searching for an empty seat. Unfortunately, every seat was taken, and no one noticed the young boy in need of a place to sit. Overwhelmed by nausea and fatigue from his chemotherapy, Alehegn struggled to stand amidst the bustling passengers.

At that moment, Alehegn accidentally brushed against the man seated next to him, his legs unintentionally spreading. The man, infuriated, was about to confront him. Alehegn, too weak to explain his situation, remained silent. In a fit of anger, the man pushed him to the ground. Tears filled Alehegn's eyes as he felt awful due to such mistreatment. Fortunately, a bystander who witnessed the incident came to his aid, helping him up, and offering words of encouragement: "Take courage." This kind stranger then offered Alehegn a seat, providing him with the support, he desperately needed.

The incident left Alehegn with a deep scar on his heart. It served as a painful reminder of his suffering and anguish, creating feelings of resentment within him. He often found himself lamenting his situation. Reflecting on that day now, he realises how deeply it hurt him—how some people's actions can harm you while others can offer healing and support.

## **Final Decision ...**

Today, even though Alehegn is no longer sick, he must adhere to a strict medical regimen. This means travelling from Gojjam to Addis Ababa for his doctor visits. It has been over 10 years since he last underwent chemotherapy, and now he is following up on treatments for other cancer-related conditions. If someone were to observe Alehegn closely, they would see that he is currently in good health and maintaining a normal condition.

His parents believe he has fully recovered, having witnessed a significant improvement in his health. Consequently, they have stopped assisting him with his follow-up therapies. They feel they have exhausted all their resources to support him and are unwilling to pay any longer out of pocket. Alehegn was not disappointed by their decision. He reached out to MWECS to share his situation. MWECS recognised the depth of his need and promptly provided the support he required. The society agreed to cover all his travel and accommodation expenses for any medical appointments he needed to attend.

**Alehegn gratefully accepted MWECS's support. With MWECS managing his accommodations and transportation, he continues his routine treatments. Now, at 21 years old, he remains a young man who never gives up on his goals, despite the many highs and lows stemming from his health condition. Having pursued his education diligently, he has completed ninth grade.**

Alehegn is fully dedicated and focused on achieving his goals, and we all wish to see him succeed and remain healthy. He relies on and has faith in his Lord, who has provided him with everything he needs, including the strength and support to continue his journey.



## **A Hope that Flourished** The Woman of Tehuledere...

Fatuma Ali has many dreams for the future. She has chosen to cross the sea and seek opportunities abroad for the sake of her only child. Working in Arab countries is not as easy as working from home, but she remains committed to her sacrifice until she sees little Osman grow up.

One day, Fatuma received a phone call from her relatives that compelled her to make a decision. She immediately requested a leave of absence from work and was granted two months.

Upon her arrival in Addis Ababa, her sister welcomed her. Shortly after, she learned that her son and husband were nearby. To her shock, little Osman had not been at school as she had expected; he was admitted to Tikur Anbessa Specialized Hospital and was receiving treatment.

Fatuma could hardly believe the news and, with a heavy heart, asked what had happened to him. They informed her that her child had been hospitalised for a year and four months due to his illness. Fatuma rushed to the location where her son and husband were. Her husband was struggling with depression, and little Osman hadn't grown as much as she had hoped.

Seeking answers, she learned that the complications arose from a small swelling on his neck. Gradually, she discovered the heartbreaking truth: her only child was suffering from blood cancer, specifically Leukemia. Fatuma fainted upon hearing the devastating news, as she had previously heard that this is a critical disease from which no one can recover.

**The father and son arrived at Tikur Anbessa Specialized Hospital immediately after stepping out of the car that had brought them to Addis Ababa. Osman was quickly admitted and began receiving treatment, thanks to the referral documents they had. The two-month treatment period felt incredibly isolating as they received no visits from relatives.**

Soon after his treatment, Osman was set to be discharged and continue with outpatient examinations. However, when the father heard this news, he hesitated to take his child outside. He was unsure of any nearby places to stay until Osman's therapy was completed. Overwhelmed, he knelt and buried his head in his arms, feeling lost and confused about where to take Osman. He felt utterly alone in that moment.

Passersby who noticed his loneliness and desperation didn't hesitate to gently wipe away his tears. They offered advice about places and facilities where cancer patients like Osman could stay. Eventually, the father took his child to the Mathiwos Wondu-YeEthiopia Cancer Society. During longer treatment intervals, they would return to their residence and come back to the centre for the upcoming sessions. The father did everything he could to secure free treatment for his son, even selling his father's bull when Fatuma's funds became insufficient. He had exhausted all his resources and belongings.

Mother Fatuma Ali is currently at the MWECS centre for her son. She speaks softly and is gentle in her demeanour. Osman, their only child, has been battling leukaemia for several years, starting at the age of seven. After Fatuma returned to Addis Ababa, her husband struggled to manage household chores while she was at the centre. Likewise, she found it challenging to understand how a man could handle everything on his own. Fatuma feels the same way when her spouse is absent; she misses his support and assistance.

## **Osman Currently . . .**

**Osman is now a 17-year-old teenager. Despite battling leukemia for nearly ten years, there are currently no signs of cancer in his blood.**

However, he is now facing a nerve condition that has recently emerged. Still, this does not stop him from pursuing his education. He had previously paused his studies in sixth grade but he is currently enrolled again. Osman loves writing and reading, and he aspires to become a doctor, in the future.

Like the Biblical character Job, Fatuma is a patient and determined mother. She and her husband decided to postpone having another child until Osman had fully recovered. Moreover, she has resolved never to work abroad again. Fatuma and her son reside at the Phangisile Psychosocial Support Center provided by MWECS, where they receive free housing and other support. With Allah's grace, they have chosen to face Osman's battle with cancer together, holding on to hope for a brighter future. We wish them the best possible outcome.



## Awards Obtained by Mathiwos Wondu- YeEthiopia Cancer Society



Mr. Wondu Bekele, CEO of our society, was awarded the **Exemplar/ Distinguished Community Service Award** in Washington, DC, USA, on September 23rd, 2017, by the People-to-People Association.



On August 27th, 2019, our society received the **Warrior Against Cancer Award** from the President of BMSF at BMSF-STF's 20<sup>th</sup> Anniversary program held in Durban, South Africa.



In 2020, Mr. Wondu Bekele was nominated as one of the six recipients of the World Health Organization World **No Tobacco Day Award 2020**.



Mr. Wondu Bekele, at a side event of the United Nations meeting held in New York on September 21st, 2017, received the **Enabler of Vision Award**.



In 2018, Mr. Wondu Bekele was nominated among the three finalists and runner-up for the **International Union Against Cancer (IUCC) CEO Award**. He was the only one from Africa. IUCC is one of the largest cancer organizations with more than 1,200 members.



During the 50th anniversary celebrations of the Consortium of Christian Relief and Development Association (CCRDA), Mr. Wondu was awarded the **Golden Jubilee Good Practice Award** on June 15<sup>th</sup>, 2023.

# WOULD YOU LIKE TO BE HEALTHY AND HAPPY?

## The Power to Choose Joy & Wellness is in Your Hands!

Below are Some Tips!

The World Health Organization defines "health" as "a state of complete physical, mental, and social well-being, not merely the absence of disease or infirmity." While there are numerous possibilities for sustaining a fulfilling and comprehensive healthy life, some key options are listed below:



Maintaining a nutritious diet



Staying within a healthy body weight range



Performing regular physical activity



Abstaining from tobacco usage



When you're feeling stressed, share with others



Meditate and pray



Be grateful



Abstaining from alcohol usage



Abstaining from khat usage



Cutting back on sugar and salt intake



Learn to save



Give generously



Spend time admiring the beauty and verdure of nature



Cutting back on fatty substance consumption



Maintaining excellent sleeping habits



Drinking adequate water



Develop your communication skills



Take care of yourself.



Build a fulfilling relationship or marriage.



# ዓለም-አቀፍ ክፍያን በቀላሉ በዳሽን ማስተር ካርድ

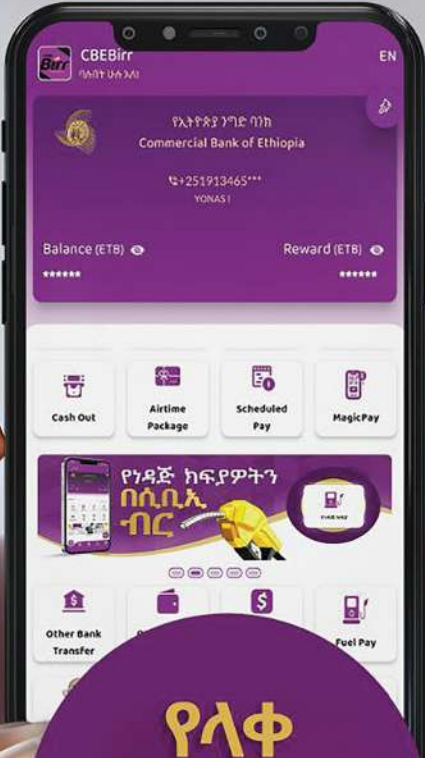
በዋና ዋና ዓለም አቀፍ ገንዘቦች የቀረቡ! ክፍያን ያለ ካርድ (ሽርቶዋል) እና በካርድ ያለ ንክኪ መፈጸም የሚያስችል።



ለበለጠ መረጃ  
06333 ዲ.ዲ.ሉ.ልን!







**የለቀ መተግበሪያ**  
ከአዳዲስ አገገሎቶች ጋር

የተሻሻለውን መተግበሪያ ያውርዱ



የኢትዮጵያ ንግድ ባንክ  
Commercial Bank of Ethiopia

# A HISTORIC MISSION

THAT TURNED BITTER FAMILY GRIEF INTO OPPORTUNITY!

Mathiws Wondu-YeEthiopia Cancer Society

**20** YEARS OF JOURNEY  
17.4.2004 - 17.4.2024

Special Edition

# FERTUNA

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



ማኑዊስ ወንዱ - የኢትዮጵያ ካንሰር ሶሻይቲ  
Mathiws Wondu - YeEthiopia Cancer Society

MWECS, HEAD OFFICE AND PSYCHOSOCIAL SUPPORT CENTER

Queen Elizabeth 11 Street, Kebena  
beside Mini Football Stadium

+251-118-122838

80571

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

[ict@mathiws.org](mailto:ict@mathiws.org)

[wondub@mathiws.org](mailto:wondub@mathiws.org)

<https://facebook.com/mwecspage/>

Addis Ababa, Ethiopia

