

The accidental teacher

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Run for a Cure Africa is a Nigeria based community initiative supporting and educating women about breast cancer screening, diagnosis and treatment © Ebele Mbanugo / RFCA

Ebele Mbanugo's mother was diagnosed with breast cancer in 2007. The experience changed Ebele in a way that she never thought would be possible, and it motivated her to work to improve the lives of women, like her mother, diagnosed with breast cancer in Nigeria. As she travelled the journey alongside her mother and women she met, she learned and adapted the campaign she has led, now recognised as an international example of change in global cancer care. To coincide with [World Cancer Day](#) [1], Ebele shares why "*I am an advocate and I will educate*" is her mantra this 4th February.

The “Big C”

I knew nothing about cancer. I vaguely remember my father telling me one of my aunts had breast cancer when I was in university. Having never been directly affected by the disease, I couldn't grasp the enormity of the diagnosis. Fast forward ten years and another diagnosis closer to home would change the way I viewed this horrible disease. In June 2007, my mother was diagnosed with breast cancer.

My mother approached breast cancer head on – much like any other obstacle she had encountered in life. By December 2008, it appeared as if she had done just that, overcome breast cancer. Thankful that my mother had survived her first bout of cancer, I was moved to start a breast cancer awareness program in Nigeria, so that Nigerian women could have the same chance at survival. In 2009, I walked into the labyrinth that is breast cancer management in West Africa by starting what is now [Run For a Cure Africa](#) [2](RFCA).

Money is not the biggest problem

In the beginning, it was just an awareness run. We raised money through donations to purchase mammogram machines for local hospitals. However; two years into the initiative, in 2011, we realised there were many other factors contributing to the high mortality rate from breast cancer and purchasing machines were of no use if the people did not understand the necessity of annual screenings. That is when RFCA truly became a community organisation.

We immersed ourselves in the communities so that we could understand and address their unique challenges and barriers. In the beginning, people were wary of our goodwill and were apprehensive to attend our screening outreach. We had three participants at our first screening exercise, we couldn't find quite the right incentive. I remember someone telling us, 'Nigerian women do not want to know anything about breast cancer'. Discouraged, I started to believe this was true. But we were determined to persevere, and over time, our numbers grew. We became part of the fabric of the community. The participants were so grateful for our program and the value and impact of the programme to them was increasingly clear.

"We soon realised that alongside affordability, knowledge and understanding of how to manage treatment were also significant concerns".

We continued with our annual runs and support for them grew tremendously. Patients started reaching out to us for financial support for treatment. It was then that we started the [Pink Fighter's Club](#) [3], a financial assistance program for economically-disadvantaged patients, which is practically everyone. We were fortunate to be able to offer this support, but we soon realised that alongside affordability, knowledge and understanding of how to manage treatment were also significant concerns.

Judith's Story

Out of respect for her family, I will call her Judith. When Judith approached us for financial support, she was an energetic and bubbly middle-aged woman. Although she was diagnosed with breast cancer, she refused to let her current predicament steal her shine. We explained to Judith that we had set up an account for her at the public hospital and all she had to do was show up for her appointments. What felt like over a year later, I received a panicked phone call from Judith telling me that she was instructed to get re-approval to continue her treatment. I wondered to myself, "Why did she need permission to continue her treatment?"

When I met Judith and her husband, I noticed a markedly different Judith. She looked gaunt, stressed and her stomach was noticeably swollen. She narrated to me how she had started her treatment but when she started feeling better, she decided not to continue. Judith said she even went to church to give thanks and celebrate her healing. It was not until her stomach started to swell that she rushed back to the hospital. They told her since she had discontinued treatment, she had to come back to RFCA to get permission to start support again. She was also told that her cancer had spread.

My heart broke witnessing the disappointment and despair Judith was experiencing. I was also saddened by the thought, 'more could have been done' had Judith had the knowledge and tools to effectively manage her treatment after diagnosis.

Judith passed away shortly thereafter. Her husband called to say 'thank you' for our assistance, but I was sure we could have done more.

'I Am an Advocate and I Will Educate'

For World Cancer Day in 2018, we took to Keffi Market in Lagos, Nigeria to do a flash mob skit to raise awareness of the importance of breast cancer screenings. I had reservations about how effective we would be, going to such a busy market and disrupting their routine. But I was surprised. Once the skit started, the entire market came to a stand-still. The skit lasted about 20 minutes, but the audience was so captivated, it seemed like only five.

After the skit, people were clamouring for information. I started to wonder, if information were tailored to patients' specific contexts and cultures, would patients like Judith better understand their diagnosis? If Judith could have seen herself in these characters, would she have understood the importance of completing her treatment?

As God would have it, I received notice from the Union for International Cancer Control (UICC) about the Astellas Oncology [C³Prize](#) [4]® and fortunately for RFCA, the sponsors were looking to effect change in cancer care in low-middle income countries. I decided to produce an entertaining audio series to provide education about breast cancer

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through real-life characters. After a nerve-racking pitch, I won the C³Grand Prize. I still cannot express how grateful and humbled I am to be chosen, but I do know that I've been given an opportunity to help another patient, like Judith, understand their diagnosis better.

As we approach [World Cancer Day 2019](#) [1], my 'I Am and I Will' statement, has to do with education. Education for every 'Judith' I will meet on this journey.

On January 8, 2016, my mother passed away after her breast cancer metastasised to her brain. Still a very hard pill for me to swallow. I know her life was a catalyst to start my journey in breast cancer awareness and management. I am no longer ignorant to the challenges presented by a cancer diagnosis, but I am also not powerless in providing much needed education to ease this journey.

About the author

Ebele Mbanugo, Ed. D (@RFCANG [5]) is the founder and Chief Executive Officer of Run For a Cure Africa (RFCA). After her mother's battle with breast cancer, she founded RFCA in 2009 with the vision of providing free breast cancer screenings to the underserved women of Nigeria. This program has now grown into organizations operating in four countries (Nigeria, Cameroon, Ghana, and the United States as a 501 (c) 3 not for profit). She has worked in breast cancer management in West Africa for 10 years. She has a B.A. in Psychology and a Master's and Doctorate in Education. She is married with two children.

<https://www.worldcancerday.org/> [1]

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[3] <https://www.rfcafrica.org/programs/pink-fighters-support-group>

[4] <https://www.c3prize.com/>

[5] <https://twitter.com/RFCANG>

[6] <https://old.ncdalliance.org/news-events/news/i-am-and-i-will-world-cancer-day-2019>

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