

# MATHIWOS WONDU YEETHIOPIA CANCER SOCIETY (MWECS)

# Newsletter

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# **Ethiopian Christmas Party for Paediatric Patients**

Ethiopian Christmas party was organized on January 7, 2012 at the Black Lion Hospital. More than 120 pediatric patients and their families attended the party. On January 5, 2012 50 Birr was given to each pediatric patient from MWECS as Ethiopian Christmas gift.

Dr. Aster Tsegaye the then Chief Executive Officer of the Black Lion Hospital was Guest of Honor of the program. Dr. Aster Tsegaye donated several kilograms of orange fruits and presented moving and emotional speech to the participants. The guest of honor briefed the participants on the on-going efforts to enhance the capacity of the hospital in general and cancer treatment in particular, including increment in budget for cancer medicine. She also reminded the patients and their families could play in improving the standard of the hospital particularly in keeping their rooms and its surrounding areas clean, and drastically decrease the number of visitors which is one the basic requirements to improve the standard of cancer treatment. She also reminded the participants that the hospital was built by the contribution of the Ethiopian people half a century ago and confirmed their indispensable role in renovating and strengthening the hospital facilities. She called upon the Ethiopian people and friends of the hospital to involve and participate in raising funds to renovate and expand the leading referral and teaching university hospital in Ethiopia.

Thanks to one of MWECS members and faithful supporters, Mr. Samuel Derebew, lunch was served for pediatric patients and their families. Mr. Samuel Derebew has been providing the same kind of support at least three times a year for the last six years. Painting, questions and answer contests were also held among the children and that created a wonderful festive atmosphere. Different kinds of awards were given to the winners.



Dr. Aster Tsegaye, the then Chief Executive Officer of the Black Lion Hospital and Guest of Honor of the program presenting opening remarks and officially opening the party.

Cancer patients and their families face many challenges that may leave them feeling overwhelmed, afraid and lonely. It is difficult to cope with these challenges or to talk even to the supportive family members and friends. Often support groups like ours can help people affected by cancer to feel less desolate and this can improve their ability to deal with the uncertainties and challenges that cancer brings. In fact, attention to the emotional burden of cancer is sometimes part of a patient's treatment plan.



Dr. Aster Tsegaye in the centre with the organizers of the party, to her left is Mr. Girma Neway member of Board of Directors of MWECS, Wondu in the middle, to her right is Mrs. Amsale Beyene mother of Mathiwos, who lost his life due to leukaemia and our society named after, Betty of Ethiopian Airlines and Dr. Yetenayet Abebe, Chairperson of Fund Raising and Promotion Committee and member of Board of Directors of MWECS.

# World Cancer Day observed in Ethiopia for the fifth time running

Panel discussion on World Cancer Day was held on Saturday February 4, 2012 at Ethiopian National Theater starting 9:30AM. Several senior cancer specialists and oncologists presented briefings on different cancer related topics and question and answer session followed afterwards transformed the program in to one of inspirational of its kind. The panel discussion was well presented by local media including ETV, different FM radio stations and print media.

Mr. Wondu Bekele, General Manager of Mathiwos Wondu-YeEthiopia Cancer Society welcomed the participants on behalf of the society and himself. He briefed the audience on how World Cancer Day was initially approved in 2000 by the World Cancer Congress held in Paris, France. He gave summarized briefing on UN Political Declaration on Non-Communicable Diseases (NCDs). He outlined, unless addressed, the mortality and disease burden from NCDs in general and cancer in particular will continue to increase and will become a double burden to the national health care system where communicable diseases are the major health problems and imposing a heavy burden on socioeconomic development. Quoting WHO and UICC, he confirmed that Cancer kills 21,800 people around the globe every day and ending cancer should be on the global health and development agendas. He familiarized the campaign statement for 2012 "Together it is possible" selected because it is only by every person, organization, government individually doing their part that the world will be able to reduce premature deaths from cancer and other NCDs by 25% by 2025.

According to Mr. Wondu Bekele, lack of awareness is another big problem here in Ethiopia. There is lack of awareness about the magnitude of the problem. There are also stigma and misconceptions about cancer; that all cancers are incurable. There is little work done, to date, to promote the awareness that most cancers can be prevented, can be cured if diagnosed early, and quality of life of patients can be improved even if the disease is diagnosed in advanced stage. He finally invited all to join his society in awareness creation and prevention activities, the overall objective of which will be to enhance the awareness of the society of cancer and its prevention and treatment possibilities, believed to be very effective in reducing the overall cancer burden.

Dr. Abebayehu Assefa, WHO – DPC Cluster Lead made opening remark on behalf of Dr. Fatoumata Nafo Traore, the then WHO Representative-Ethiopia and presented message which summarized the active involvement and participation of his esteemed organization has been playing to challenge the growing burden of NCDs in general and cancer in particular. He emphasized the WHO African regional strategy for cancer prevention and control that adopted in 2008 to effectively scale up priority interventions. He also underlined that the national health systems should be oriented towards the promotion and support of healthy lifestyles within the primary health care approach in order to make healthier choices and follow lifestyle patterns that foster good health call all stakeholders to implement strategies recommended by WHO for cancer prevention and control, the Brazzaville Declaration, the Moscow Declaration and the Political Declaration of the UN High level meeting on NCDs so as to drastically reduce cancer burden in the Region. As UN specialized agency responsible for health, he reaffirmed the commitment and support of WHO towards strengthening the on-going efforts to challenge the growing burden of NCDs in Ethiopia. Dr. Abebayehu Assefa, finally invited all concerned to align under the banner of 'Together it is possible'; and urged all to support the milestone to encourage everyone affected by cancer (individuals, civil societies and governments), to ensure that they take responsibility for reducing the burden of cancer.



Far left Mr. Wondu Bekele; Dr. Bogale Solomon; Dr. Aster Tsegaye; Dr. Mathiwos Assefa; Dr. Wondemagen Tigeneh; Dr. Abdulkadir Mohammed Seid; Dr. Amha Gebremedhin.

Dr.Bogale Solomon, Dr.Wondemagen Tigeneh,Oncolgist, Dr.Mathiwos Assefa, Oncologists, Dr.Amha Gebremedhin, MD, Associate Professor of Medicine and Blood Cancer Specialist, Dr.Abdulkadir Mohammed Seid, Pediatric Specialist presented briefing on world cancer day, epidemiology of cancer, cancer prevention, blood cancer and pediatric cancer respectively.

Mr.Habtamu Belete, Dr.Yetenayet Abebe and Mr.Dereje Seyoum presented message of support from Ethiopian Cancer Association, Mathiwos Wondu-YeEthiopia Cancer Society and Ethiopian Public Health Association respectively.

Dr.Aster Tsegaye CEO, of the Black Lion Hospital appreciated and thanked all participated, particularly Mathiwos Wondu-YeEthiopia Cancer Society for organizing the panel discussion. She outlined how her medical center of excellence for referral and teaching in Ethiopia once built with the contribution of Ethiopian people now desperately looking for every kind of support. She reminded the audience the hospital which was built with the state of the art of technology and facility at a time now requires renovation and reorganization. She finally called upon all friends of the hospital inside and outside Ethiopia, to help the hospital in whatever way they can so that it can justify its existence and objectives.

# Mathiwos Wondu-YeEthiopia Cancer Society held its eighth general assembly meeting.

The Eighth General Assembly meeting of Mathiwos Wondu-YeEthiopia Cancer Society (MWECS) was held on Saturday March 17, 2012 at Italian Cultural Institute. Mr. Seid Ali, Chairman of the General Assembly of MWECS, chaired the meeting. Members, cancer patients and their families attended the meeting. The Assembly reviewed and accepted membership application requests of 97 candidates, of which 75 are students and 22 are employees at government and non-government organizations.

Members of the society and patient families actively participated in reviewing respective reports and plans and on how to strengthen the financial and organizational capacity of our society. The assembly reviewed and approved the operational report, financial statement and external audit report of the 2011 budget year and so does the budget and action plan for the year 2012.



While Mrs. Tadelech Debele and Mr. Seid Ali, General Secretary and Chairman of the General Assembly of MWECS presiding over the meeting in the middle, far left is Dr. Yetenayet Abebe and far right Engineer Tadele Bitul Kibret both members of Board of Directors attentively following.

Dr. Yetenayet Abebe; Mr. Wondu Bekele and Mr. Woinaferaw Zeleke presented Society's 2011 budget year board of birectors, secretariat and external audit reports respectively.



Some of the General Assembly meeting participant poised for photos.

# Social care support for pediatric cancer patients

Cancer impact mitigation project is one of the five projects being implemented by MWECS. The project is designed to improve the existing treatment condition and support pediatric cancer patients and their families and began in 2010 budget year.

The project is intended to decrease the suffering of pediatric cancer patients and increase their survival rate. So far, the Black Lion Hospital is the only cancer treating hospital in Ethiopia; the three wards of pediatric department of the hospital have the capacity of treating about 115 children at a time. At the present, of the total patients under treatment, 26 or more than 22.6 % are pediatric cancer patients and this at times increases to 50%. This clearly shows how the number of pediatric cancer patients is alarmingly increasing. Since we start the project, we have been supporting more than 77 pediatric cancer patients. Of the total 77 patients covered by the project 24 patients lost their lives due to cancer complications, we also lost contact with 19 of them, and at the present, we are providing support to 34 pediatric cancer patients of which 16 or 47 % are leukemia patients.

#### Awareness creation and prevention activities.

Our Society is a member a National Working Group on Non-Communicable Diseases (NCDs) formed under the Federal Ministry of Health of Ethiopia and partially supported by World Health Organization (WHO) Country Office. We have been actively working in developing strategy on non-communicable disease.

Thanks to our continuous and concerted efforts the Strategy we developed have been reviewed and approved by the management of the Federal Ministry of Health and included in the fourth Health Sector Development Program (HSDP) and Growth and Transformation Plan (GTP), for 2011-2015 periods. This is a huge way forward, which can create conducive condition and help to get

appropriate attention from government and organizations. This will take some time but it is very big achievement for NCD in general and cancer in particular. The next step will be development of programs for each non-communicable disease. Towards these the Federal Ministry of Health and WHO Regional Country Office jointly started looking for competent consultant who can be assigned as technical advisor and coordinate program development activities.

The decisions taken by the UN High Level Meeting and approval of the historical political declaration on Non-Communicable Diseases and last June's historical World Health Assembly meeting decisions are recent positive developments regarding NCDs. Both meetings are expected to spur the national governments for actions and so does Ethiopia.

The sixty-fifth World Health Assembly meeting concluded after adopting 21 resolutions and three decisions on a broad range of health issues. The six days (June21-26, 2012) of discussions involved nearly 3000 delegates, including health ministers and senior health officials from amongst the 194 WHO Member States, as well as representatives from civil society and other stakeholders. Member States agreed and adopted a global target of a 25% reduction in premature mortality from non-communicable diseases such as cardiovascular disease, cancer, diabetes and chronic respiratory diseases by 2025.

We believe the Meetings acknowledged the global burden and threat of NCDs and impact on social and economic development in all countries. However, more needs to be done on the action side of things. Our work is only beginning, we need governments to implement the commitments in the political declaration; we need strong global targets that set out the vision of where we are heading with our collective actions; we need national plans and strategies and we need NCDs as part of the MDGs.

This process has highlighted once again the enormous power of a united NCD control community. From the global to local level, we have united behind a common strategy and made our voices heard loud and clear. We have to continue our united effort and commitment and will not rest until we have quality health services for those living with NCDs, and until measures are in place to stop the increase in new cases. Together, we are moving into a new era for global NCDs control and more than ever before we are certain, together we can challenge the growing burden of NCDs and can make a difference!

Thanks to the support of American Cancer Society, we are implementing the "Meet the Targets" project. The major objective of the project is to familiarize and encourage the timely implementation of the political declaration in Ethiopia. Towards this end, with the help of professionals, we have already translated the declaration in to three major languages of Ethiopia, Amharic, Oromifa and Tigrigna. The Oromifa and Tigrigna versions are under review by the health bureaus of Oromia and Tigray regional states. Once we get their comment and recommendation we will print in mass and distribute to various woredas and kebeles under their supervision.

#### Easter Party with Paediatric Patients and their families

Ethiopian Easter party was organized on April 15, 2012 at the Black Lion Hospital. More than 120 pediatric patients and their families attended the party. On April 12, 2012 50 Birr was given to each pediatric patient from MWECS as Ethiopian Christmas gift.

Dr. Aster Tsegaye, the then Chief Executive Officer of the Black Lion Hospital was Guest of Honor of the program. Dr. Aster Tsegaye donated several cakes and biscuits and presented moving and emotional speech to the participants. The guest of honor briefed the participants on the on-going efforts to enhance the capacity of the hospital in general and cancer treatment in particular, including increment in budget for cancer medicine.





Left, Dr. Aster Tsegaye, CEO of the hospital officially opening the program and Dr.Aster with her left with Betty of Ethiopian Airlines and on her right, Amsale, Wondu and Dr.Yetenayet Abebe.

Thanks to one of MWECS members and faithful supporters, Mr. Samuel Derebew, lunch was served for pediatric patients and their families. Painting, question and answer contests were also held among the children and that created a wonderful festive atmosphere. Different kinds of awards were given to the winners.

# Observe World No Tobacco Day observed in Ethiopia

Panel discussion on World No Tobacco Day was held on May 31, 2012 at Ghion Hotel. Several senior officials from government and non-government organizations actively participated. The panel discussion was organized by the Ethiopian Food, Medicine and Health Care Administration/FMMACA/ with the collaboration and financial support from World Health Organization Ethiopia Office.

# **Ethiopian New Year Party for Pediatric Patients**

Our society organized Ethiopian New Year Party on September 11, 2012 starting from 10:30 A.M to the paediatric patients and their families under treatment at the paediatric ward of the Black Lion Hospital.

Members, friends of our society and students from more than five schools here in Addis Ababa, Ethiopia, including students from Hayat Medical College, Nativity Girls School, Nazareth Girls School, School of Tomorrow actively participated in organizing the party to more than 130 children and their families. Mr. Samuel Derebew, member of our society, owner and Managing Director of Victory Restaurant and National Café both situated within the vicinity of down town Addis covered almost all costs of food and soft drinks. Students of Hayat Medical College, Nazareth, Nativity, Cathedral and School of Tomorrow brought soft drinks and biscuits while Mr. Asegdom, Mr. Tadesse, Mr. Yonas, Dr. Yetenayet, and Mathiwos's family brought cakes, biscuits and big bread for the occasion. We would like to thank all for their participation and contribution.

In addition to well-prepared delicious food and drinks served to each participant, the highlight of the party was the music, painting, questions and answer contest organized jointly by our members and students. After serious selection, the winners of the contest were selected and prizes were given accordingly. In addition to these, various gifts were given to each participant of the program. On the previous day, 79 paediatric patients were given Birr 50 each from the Society's account to show the sympathy and concern the Society has for the paediatric patients our society is formed to serve.

# **Breast Cancer Day Observation**

The "Save Your Life with Self Breast Examination" program organized by Mathiwos Wondu-YeEthiopia Cancer Society, with the collaboration of Ethiopian Cancer Association and Cancer Care Ethiopia in support of October International Breast Cancer Awareness Month was held on October 28, 2012 in front of the General Post Office, here in Addis Ababa, Ethiopia. More than 5,000 people including Mr. Ahmed Emano Mustafa, Public Relation Director of the Federal Democratic Republic of Ethiopia Ministry of Health representing the Federal Ministry of Health, Ms. Mulu Solomon, well-known writer, poet and President of Ethiopian Chamber of Commerce participated in the program. Briefing on cancer in general and breast cancer in particular was presented by Dr. Bogale Solomon, Consultant and Clinical Oncologist and Dr.Mathiwos Assefa Head of Radiotherapy Center of the Black Lion Hospital followed afterwards by emotional experience sharing by breast cancer survivor and breast cancer patient helped to transform the program in to one of the most inspirational and the largest health campaign program of its kind in the world.

Mr.Ahmed Emano in his opening remark stressed the importance of further developing and scaling up of the Health Development Sector. He also stated, while there have been significant progress towards meeting of the overall Millennium Development Goals (MDG), more work needed to be done towards improving the standard of maternal health. He also stressed the need to increase the number of health professionals, health facilities, equipping health facilities, procurement and distribution of ambulances to the various woreda's as being a key intervention towards facilitating the delivery of effective health care.

According Mr.Ahmed Emano, Ethiopia, widely believed to be one of fastest growing non-oil economies in Africa, is undergoing a rapid economic transformation that is increasingly accompanied by changes in the dietary and lifestyle behaviors of the population that contribute to increasing risks of preventable chronic illnesses. The double burden of communicable and chronic diseases is a challenge to health as well as to national socio economic development. In Ethiopia, chronic diseases are posing a formidable social and economic burden on individuals, families and the nation at large. A considerable amount of public and private resources is being taken up for the clinical care of patients with chronic diseases.

Mr.Ahmed Emano noted that, until recently, there had not been a national strategy or program that ensures the effective and efficient utilization of human or financial resources for the prevention and management of chronic diseases in the country. The long awaited Strategic Framework document on Non-Communicable Diseases (NCDs) in Ethiopia has been reviewed and approved by the Federal Ministry of Health and included in the fourth Health Sector Development Program (HSPD) and Growth and Transformation Plan (GTP) of the country, for 2011-2015 periods. With the coordinated effort of the Federal Ministry of Health /FMoH/ and WHO Country Office, the Working Group on NCDs started working on national strategic action plan, development of program, guidelines and protocols to challenge the growing burden of each NCD here in Ethiopia.



From far left Mr.Desalegen Kassa master of ceremony and Dr. Yetenayet Abebe both from MWECS familiarizing the program and presenting welcoming speech respectively and Mr. Ahmed Emano Guest of Honor, presenting opening remark.

Mr.Ahmed Emano confirmed the commitment of the ministry in challenging the growing burden of NCDs in general and cancer in particular and noted that project is under way to improve the existing cancer diagnostic & treatment facilities by expanding the services, as initial step, to selected regional university hospitals. Plan on human resource development for the expansion sites and to sustain the services nationally was considered by upgrading the Tikur Anbessa Hospital, this include preparation to implement education/training clinical oncologist, Nuclear medicine physician, medical physicist, technologist, oncology nurses is already initiated. Besides, due consideration is taken on the required future expansion needs.



From far left, Mr. Berhanne Deressa former Mayor of Addis Ababa, Engineer Tadele Bitul Kibret member of Board of Directors of MWECS, Mr.Ahmed Emano, Guest of Honor, Dr. Bogale Solomon, Consultant and Clinical Oncologist, and Mr.Seid Ali, Chairman of MWECS.

Mr.Ahmed Emano finally congratulated all three cancer organizations for successfully organizing the walk program and declared its commitment to become actively involved in assisting the organizations effort in every possible way, to help make a difference in the outcome of a cancer prevention and treatment and to take part in the national effort, by filling the gaps that the government alone is not in a position to handle.







From left, Dr. Bogale Solomon and Dr. Mathiwos Assefa presenting briefing on breast cancer and Ms. Mulu Solomon sharing her own success story in the business world and encouraging the organizations and participants on how to challenge the growing cancer burden in Ethiopia.

This wonderful event, the overall objective of which will be to enhance the awareness of the Society of cancer in general and breast cancer in particular, believed to be very effective in reducing the overall cancer burden.

The program here in Ethiopia started in October 2007 and by last year 2011, during our fifth campaign in Ethiopia, thousands participated in the walk program and the program was well presented on local media. Next year, we are planning to conduct the program in major cities of Ethiopia.

Cancer Awareness Month is an annual international health campaign organized by major cancer organizations every October to increase awareness of the disease. The campaign also offers information and support to those affected by breast cancer.







From left, Mr.Habtamu Belete, Sister Debrework Teshome and Mr.Wondu Bekele presenting welcoming speech on behalf of Ethiopian Cancer Association, Cancer Care Ethiopia and Mathiwos Wondu-YeEthiopia Cancer Society respectively.



Emotional experience sharing from breast cancer survivor.

In October 1983, the <u>Race for the Cure</u> was held for the first time in Dallas, Texas, where 800 people participated. In 1993 <u>Evelyn Lauder</u>, Senior Corporate Vice President of the <u>Estée Lauder Companies</u> founded The Breast Cancer Research Foundation and established the <u>pink ribbon</u> as its symbol, though this was not the first time the ribbon was used to symbolize breast cancer. In the fall of 1991, the Susan G. Komen Foundation had handed out pink <u>ribbons</u> to participants in its New York City race for breast <u>cancer survivors</u>.

During Breast Cancer Awareness Month each October, people raise money by organizing activities such as theme parties or a "pink day" (when employees wear pink clothing or accessories) at work. The money raised is donated to the organizers' choice of breast cancer care or research programs.



Official opening of the walk program.



The walk program managed to attract huge participants according to some estimates more than 5,000, widely believed to be one of the largest public health campaign programs in the whole world.

Early detection of breast cancer means a patient has more treatment choices and a much better chance of recovery! In some cases early detection can increase, survival rates by up to 90%. Towards this end we have developed a guideline to encourage self-examination. Recent studies show that breast cancer is linked to several environmental and genetic factors, which can be controlled or mitigated.

#### **Conduct Fund Raising Activities**

As part of the fund raising program, Jazz and poem night was organized at Taitu Hotel, widely believed to be the first and the oldest modern hotel in Ethiopia. Several organizations and professionals actively participated in the program. The followings organizations and individuals participated in the program:

#### Sponsors:

Jazz Amba Lounge-- Gave the venue for free.

Amba Pharmaceuticals PLC --- sponsored the event and donated Birr 5,000.00.

Industrial Project Services PLC ---- sponsored the program and donated Birr 3,000.00.

Dashen Cake ---- sponsored the program and donated Birr 3,000.00.

Fresh Events --- helped in organizing the program for free.

#### Individual participants:

Addis Taem Band. Poet Misrak Tereffe.

Poet Abebaw Melaku.
Poet Cherenet. W/Gebriel.
Poet Efrem Seyoum.
Painter Melat Aklilu.
Artist Gash Abera Molla --- Gave life to the program as Master of Ceremony for free.

A total of Birr 14,000.00 secured from sponsors and Birr 46,850.00 collected from entrance fee and a total of Birr 60,850.00 reported as a revenue and total of Birr 12,797.00 as expense. Finally we were able to get a total of Birr 48,053.00 net income. According to the agency's regulation will be set aside exclusively for financing project intended to support pediatric cancer patients under treatment at the Black Lion Hospital.

We all are encouraged by the involvement and participation of so many participants and by its outcome and being the first one of its kinds we have learnt a lot from its outcome.

#### **Attend Meetings abroad**

# **Working visit to the Republic of South Africa**

As a member of various international organizations, we are expected to attend at least, annual general assembly meetings of each respective organization. Except for few meetings of which total or partial travel and accommodation costs are covered by either organizers or sponsors, we were unable to attend most meetings. Taking in to account the multifaceted advantage we can get from attending these meetings, our society's seventh general assembly meeting underlined the importance of these meetings and urged our secretariat to look for all kinds of available options including looking for free air ticket and accommodation and urged to attend as much as relevant international meetings as possible.

Due to weak financial position of our society, we had never had the opportunity to attend UICC/SIOP/ICCCPO meetings before. Thanks to the all round effort and support of Kenneth and staff of ICCCPO, SIOP and CHOC, at last our general manager, Mr.Wondu Bekele managed to attend the first meeting of SIOP/ICCCPO/CHOC in Cape Town, one of the most beautiful cities in the whole world. Almost all his travel and accommodation costs were covered by our sponsors mentioned above. We would like to sincerely thank our sponsors for their generous support which enabled us to attend the historical meeting.

Mr. Wondu Bekele presented paper on the "The Role of Parent Organizations in Awareness Creation and Advocacy on Pediatric Cancer". Based on his personal and society's experience, Wondu briefed the audience, how he was able to play leading role in challenging the growing burden of cancer in Ethiopia and forced to leave a lucrative senior management position in 2009 due to conflicting interests of the two jobs he was holding simultaneously, a permanent job with National Tobacco Enterprise and voluntary part time work with MWECS, in order to devote his full attention to the work of MWECS. In addition to his role as General Manager with the Cancer Society, Wondu is a member of the National Working Group on Non-Communicable Diseases formed under the Ministry of Health and the point person for the newly formed Consortium of Ethiopian Non-Communicable Diseases Associations (CENCDA).

The overall organization of the conference was divided in to nurses, doctors and parent organization groups is undoubtedly the best option one can think of based on specialization and sphere of interest.





From far left Wondu presenting paper on the "The Role of Parent Organizations in Awareness Creation and Advocacy on Pediatric Cancer" and right Wondu together with Julia a nurse from U.S.A, Kenneth from ICCCPO, Mary and Aziza from INCTR USA.

# **Working visit to Canada**

Thanks to the all round effort and support of the American Cancer Society/ACS/, our general manager, Mr.Wondu Bekele managed to attend his first meeting of UICC held in Montreal, Canada, one of the most beautiful cities in the whole world. The meeting took place from September 27 to 31, 2012. Thanks to the support of ACS, Mr.Wondu Bekele managed to attend three important meetings simultaneously, UICC general assembly meeting, training workshop and World Cancer Congress organized by the ACS and UICC respectively.

Almost all his travel and accommodation costs particularly during the training covered by our partner, the American Cancer Society. We would like to sincerely thank ACS for their generous support which enabled us to attend these historical meetings.

The week started with the training workshop and General Assembly meeting and the excitement of having to vote for the new UICC Board of Directors. The Assembly chose 14 individuals from a candidate list of 19 and as the tension built up, members were all waiting to see how the vote had gone. Of course, all 19 candidates are extraordinary individuals, and the choice was a remarkably difficult one, but we now have a new board to support Mary Gospodarowicz in her role as President.

The World Cancer Leaders' Summit brought together leaders in the cancer world with 15 Ministers of Health and representatives from the private sector and academia. UICC launched its new toolkit for national cancer control planning and we had a lively day of debate around the theme of planning for cancer.

The Congress was attended by nearly 2,000 people from 115 countries, Wondu was the only one represented from Ethiopia. It was a great joy to see delegates mingle in the Global Village and attend many of the outstanding sessions across a broad range of topics. Our sincere thanks to the programme Committee who constructed a wonderful programme which started every day with a breathtaking group of plenary speakers.



Wondu with from left Dr. John Seffrin, CEO of the American Cancer Society since 1992 and Dr. Cynthia M. LeBlanc/Chair of the Board-at that time/, the first African American Woman to lead American Cancer Society as Chair.

Delegates from developing countries spearheaded by Wondu, were surprised to see how very little attention was given to the developing world in general and African continent in particular at World Cancer Congress. They tried their level best to contact all concerned officials and informed them their disappointment and frustration for not doing enough to present the growing burden of cancer in Africa. Taking in to account the existing condition at hand, Africa is the least prepared regions of the world for NCD catastrophe and still yet, the international community displays no sense of urgency or outrage about NCDs, the silent killer that is threatening development and economic progress in developing world in general and Africa in particular.

So now we start the planning for the Summit in Cape Town in 2013 and the Congress in Melbourne in 2014. Our thanks to the many people involved in making Montréal happen – the Congress Task Force, the Host Committee, the Programme Committee and the numerous sponsors and willing volunteers. It was great to see teamwork at its very best.

# Strengthening newly formed Consortium of Ethiopian NCDs Associations /CENCDA/

The first General Assembly meeting of the Founding Members of the Consortium of Ethiopian Non-Communicable Diseases Associations (CENCDA) organized by the Consortium of Ethiopian NCD Association/CENCDA/ in collaboration with the Federal Ministry of Health (FMoH), World Health Organization (WHO) Country Office and Management Sciences for Health/Systems for Improved Access to Pharmaceuticals and Services (MSH/SIAPS), with the help of the financial support gained from the U. S. Agency for International Development (USAID), was held at the meeting hall of Management Sciences for Health on July 20,2012.





Left Ms.Misrak Tarekegn of Ethiopian Diabetes Association introducing agenda and program of the meeting and right Mr.Wondu Bekele from Mathiwos Wondu-YeEthiopia Cancer Society and Focal Person of CENCDA presenting welcoming speech.

Guest of Honors, Dr. Mahlet Kifle and Dr.Andria Brunie confirmed that non-communicable diseases (NCDs) - namely cancer, cardiovascular disease, chronic respiratory diseases and diabetes - cause 60% of all global deaths. NCDs for so long considered as a disease of the developed world, but with improved living standards and longer life expectancy, their incidence in developing countries is on the rise. According to them 80% of deaths caused by NCDs occur in developing countries.

According to Dr. Mahlet Kifle, Ethiopia, chronic diseases are posing a formidable social and economic burden on individuals, families and the nation at large. A considerable amount of public and private resources is being taken up for the clinical care of patients with chronic diseases. Until recently, there had not been a national strategy or program that ensures the effective and efficient utilization of human or financial resources for the prevention and management of chronic diseases in the country.





Dr. Mahlet Kifle Focal Person of NCDs and Dr.Andria Brunie presenting opening speech and opening remark representing the Federal Ministry of Health and World Health Organization Ethiopia Country Office respectively.



Far right is Prof. Kebede Oli, Chairing the historic meeting; next to him is Dr. Ahmed Reja Chairman of Ethiopian Diabetes Association, Dr. Mahlet kifle and Dr.Andria Brunie attentively following the meeting.

According to both speakers, 2011/12 was undoubtedly a landmark year for non-communicable diseases in general. In September 2011 governments made unprecedented political commitments at the UN High-Level Summit on NCDs and the long awaited Strategic Framework document on Non-Communicable Diseases (NCDs) in Ethiopia has been reviewed and approved by the Ministry of Health of Federal Democratic Republic of Ethiopia and included in the fourth Health Sector Development Program (HSPD) and Growth and Transformation Plan (GTP) of Ethiopia, for 2011-2015 periods.

The general assembly reviewed and approved the article of association of the consortium. Based on the article of association, the general assembly elected the followings to manage the general assembly meeting.

1. Dr. Yetenayet Abebe

Mathiwos Wondu-YeEthiopia Cancer Society Ethiopian Cancer Association Chairperson

The assembly elected five members for Board of Directors position and the board of directors in their first meeting elected chairman, deputy chairman and secretary as follows:

| 1. Dr. Ahmed Reja    | Ethiopian Diabetes Association           | Chairman        |
|----------------------|--|-----------------|
| 2. Dr.Bogale Solomon | Ethiopian Cancer Association             | Deputy Chairman |
| 3. Dr.Liassane Seifu | Ethiopian kidney Association             | Member          |
| 4. Dr.Bona Hora      | Heart Association                        | Member          |
| 5. Dr.Damte Shemelis | Mathiwos Wondu-YeEthiopia Cancer Society | Member          |
| 6. Mr. Wondu Bekele  | Mathiwos Wondu-YeEthiopia Cancer Society | Secretary       |



Some of the founding members with newly elected officials posed for photo.

In addition to approving article of association and electing officials to various posts of the consortium, intense and emotional discussion followed on how to enhance the capacity of the consortium and how the consortium can get minimum working condition such as office, office service and few permanent employees. Thanks to the wonderful leadership of Prof. Kebede Oli, members and invited guests were encouraged to share their experiences and pledge their support in whatever way they can. Encouraging comments were given including some organizations are considering collaboration between existing programs, integrating some of NCDs, such as diabetes , cervical cancer etc in their existing programs and some even went further in considering to add NCDs programs as major intervention area in their activities. And Dr. Nugusu Mekonnen from Management Sciences for Health promised to do his level best to support the consortium in getting its own office and have few permanent employees.

High level program heads from different organizations shared their experience on how they started with small pilot projects and transformed it in to bigger ones. Dr. Ahmed Reja from the Ethiopian Diabetes Association also demonstrated how they started with one project manager and managed to

open more than 37 branches all over Ethiopia. After heated discussion the participants agreed on the followings.

- The consortium needs to develop and implement its own Strategic Plan as soon as possible.
- Develop and implement small pilot projects on how to challenge the growing NCDs burden in Ethiopia.
- Concentrate on development and evidence based interventions.
- Form united front of all organizations working on NCDs and encourage nationwide interventions.
- The consortium will focus on its main attention on advocacy, awareness creation and prevention activities.

According to the WHO Country Office representative, although he has nothing to promise at this particular time, but he promised to bring the situation to the management and encourage them to do something to enhance the capacity of the consortium. The participants finally agreed on the need to support the newly established consortium so that it plays its prominent role in challenging the growing burden of NCDs.

For some time the consortium will be situated and operate from Mathiwos Wondu-YeEthiopia Cancer Society's office situated on the 10<sup>th</sup> floor of Getu Commercial Center, Room Number 1004,Africa Avenue, Bole Road, in front of New York Supermarket and Café.

# Other news of activities carried out with the collaboration of partners.

# **Operation Agreement Signed with sector organizations.**

Due to several risk factors, cancer incidence in developing countries is on the rise. Cancer is the leading cause of death in developed countries and epidemiological evidence shows that the trend in developing countries is in the same direction. By 2020, three out of every five or 70 % new cancer cases will occur in the developing world.

In Ethiopia, cancer treatment options are scarce. Black Lion Hospital, so far the only cancer treating hospital in Ethiopia, has limited ability to care for cancer patients. It does not have sufficient specialists, support staff or equipment. Chemotherapeutic medicines are not readily available, and only two radiotherapy machines exist for more than 80 million people. The hospital does not contain sufficient isolation wards to treat a growing cancer patient population, a basic necessity for effective treatment. Nor does it have the supplies to offer required care 24 hours a day. Practically some cancer related medicines are either non-existent or beyond the reach of ordinary Ethiopians.

Parents of pediatric cancer patients face many challenges in between treatments as the lack of beds does not allow them to have their children in the Black Lion Hospital, for long periods of time. Some of the parents are not able to return to rural areas due to lack of transport and they are forced to endure hardship and some are often homeless for period of "in between" treatments.

Cancer is not only a disease of the body, it affects the mind and the soul, and it also destroys the economic well being. MWECS commits itself to provide support to pediatric cancer patients, their families, caregivers, volunteers and the society at large with a holistic focus on treatment, better

nutrition , awareness raising , advocacy for policy changes , networking , solidarity with those affected by cancer , hope for survivors and honor and eternal remembrance for those who have lost their battle with cancer.

Perhaps more than any other NCD, childhood cancer is a stark reminder of the human cost of entrenched global health inequities. In developed countries, where those affected have access to highly developed treatment protocols and well-trained medical staff, 85% of children survive. However, children with cancer who live in resource-poor countries have to contend with: absence of specialist treatment facilities for childhood cancer, lack of health professionals with expertise in childhood cancer, extremely high cost of medicines and treatment, late or incorrect diagnosis, and of the small minority that are diagnosed correctly, only about 15% survive.

Despite the glaring global inequalities, childhood cancers in lower and middle-income countries, where 88% of the world's children live, receive little attention from researchers and health authorities. (Source: ICCCPO).

Even from a purely financial standpoint, investment in childhood cancer treatment makes sense as the number of life years saved by survivors of childhood cancers is very high and these children go on to become productive members of society contributing to the well-being of their communities and their own families. Cost of treatment of childhood cancer is also usually less than for adults.

Our society encouraged by all these developments has entered into the project agreement with Addis Ababa Health and Trade and Finance Bureaus to get permission to run a project under the name of cancer impact mitigation. The project aims to set up Pediatric Cancer Patients Centre, where poor pediatric cancer patients get service for palliative care, cancer medicine, shelter, food, clothing and etc. The centre will play multiple roles in the nation's bid to challenge the growing cancer burden. The centre on top of providing the above services runs Cancer Resource Centre and organizes annual events for major national stakeholders to review the on-going efforts and pave the way forward.

The overall cost of the project for three years period is 5,663,095.90 Birr (306,114 USD) and the major part of the fund is expected to be financed by the support from donors and the rest will be generated by various kinds of fund raising activities locally and abroad. We invite all to join and support us in whatever way they can, so that we will be able to decrease the suffering of cancer patients and increase their survival rates.

Although we are able to implement some of the major objectives of the project but unable to open the long awaited cancer center. We will do our level best to open the center as soon as we get the support we are desperately looking for.

# MWECS secured Capacity Building Grant from CCRDA

At the end of last year, Consortium of Christian Relief & Development Association (CCRDA) Task Force availed and offered Birr 104,000 assistance to cover costs of consultancy and professional service to conduct capacity building studies including networking, fund raising and public relation activities of our society.

Thanks to the financial support availed by CCRDA Task Force, our society managed to go through important uplifts on the following institutional areas.

#### These are:

- 1. Through adopting new strengthens on Resource Mobilization Component. This includes transformation in knowledge and practice by the society's staff in addition to the new institutional accessories availed to the society as result of this project such as the strategic document on the Resource Mobilization was developed and being implemented.
- 2. The second aspect focuses on built capacity by the society on how to apply Public Relation and Networking venues and opportunities for the good of Resource Mobilization.

Transformation along these lines is truly important for our society and for the constituency our society stands to represent. According to NCD Alliance, currently, donor countries are operating a policy ban on funding NCDs, thereby starving low-income governments of the financial and technical assistance needed to turn around the NCD epidemic. This policy has to change, with overseas development assistance aligned to the priorities of recipient countries.

We have successfully implemented the project and produced manuals and we have also completed the submission of program and financial reports accordingly.

CCRDA is the first organization who came to help us in 2008. It started its support by providing capacity building institutional strengthening support by assigning project officer and covering the salary of the project officer for the last three years on 90%, 75% and 50 % basis respectively. In addition to this it furnished our society with brand new photo copy machine and provided with different kinds of trainings.

# Soroptimist International Addis Ababa Club, donate Birr 107,000

Soroptimist International is an organization of professional women who work through international partnerships and a global network of members to improve the lives of women and girls in local communities and throughout the world. Thus Soroptimist International Addis Ababa club was established in October 2004 and chartered in May 2005 based on the objective of Soroptimist international. The club is voluntary Ethiopian Charity that has re-registered with the Charities and Societies Agency of the Ministry of Justice. Members of the club are professional women who dedicate their time voluntarily to the improvement of the lives of their Ethiopian Sisters and join hands with other Soroptimst clubs in the international arena. These women offer their valuable time to contribute their knowledge, skills and energy to the benefits of disadvantaged girls and women. The themes in which the SI Addis Ababa club working are education, health and Environment, Livelihoods and Social Empowerment.

Soroptimist International Addis Ababa Club donated Birr 107,996.04 (USD 5,753) to finance MWECS project proposal on palliative care. The project aims to reduce the extreme vulnerability of needy pediatric cancer patients by providing cancer treatment drugs as one major and lone means towards achieving its objective. The project will be operational for one year time and whose total project outlays are estimated to be 150,000 Birr.



From left Ms.Tsige Haile and Mr. Wondu Bekele, signing the agreement on behalf of their organization, Soroptomist and Mathiwos Wondu-YeEthiopia Cancer Society respectively and Ms. Tadelech Debele overlooking the ceremony.

The project being implemented by Mathiwos Wondu-YeEthiopia Cancer Society. But there will be other important stakeholders which are expected to play a crucial role in the project implementation.

The project idea surfaced after the society had made extensive consultations with beneficiaries themselves. It is during these consultations that the unaffordability of cancer treatment drugs had

been sorted out as major setbacks in their effort to access and benefit from the existing limited medical service.

# **Expected outcomes**

- Increase the number of pediatric cancer patients arriving at treatment facilities for treatment.
- Reduce the suffering of pediatric cancer patients and increase survival rate from today's despicable status.

In the end, we thank all who supported us thus far, particularly Ms. Tadelech Debele for her all round participation and support. We would like to confirm the support given will be solely utilized to implement the objectives of the project.

The project is being implemented by Mathiwos Wondu-YeEthiopia Cancer Society. Thanks to Soroptimist support our support to pediatric cancer patients and their families enhanced in quantity and quality terms. We managed to increase the number of patients covered by the project from 27 to 37 and we are encouraged to improve the quality of service, including providing essential medicines like L-Asparagines and Cytarabine.

# MWECS enters in to new project agreement with American Cancer Society

Mathiwos Wondu-YeEthiopia Cancer Society /MWECS/ entered in to project agreement with American Cancer Society/ACS/ in order to implement a project with an objective to raise public awareness on the political declaration passed on September, 2011 UN high level summit on controlling non-communicable disease and lays the ground work in Ethiopia for the full realization of the political declaration. The project is operational in Ethiopia for two years and the American Cancer Society put aside 40,000 USD for the project.

ACS has approved the grant to support the "Meet the Targets" Project Proposal for familiarization efforts in order to encourage the Ethiopian Government to implement the United Nations Political Declaration on Non-Communicable Diseases. Specifically, ACS grants such funds to cover activities fully described in the project proposal. This grant shall be used exclusively for these purposes.

- The grant is in effect from March 30, 2012 to March 30, 2014. The grant amount was disbursed through two payments in the amount of 20,000 USD each, with the first due upon execution of this agreement, and the second payable upon receipt of the Interim Narrative and Financial Reports described in the Agreement and ACS' complete satisfaction with the Grantee's progress against the purpose of the grant.
- Thanks to the recent developments happening both at local and international arena, the case of Non Communicable Diseases and the impending health crises on the global health system because of them has been able to gain increasing attentions.

We have successfully implemented the first part of the project and we have also completed the submission of interim progress report which helped us to secure the second and the last 20,000 USD set aside for the project.

# MWECS enters in to new project agreement with Initiative Africa

Thanks to the recent developments happening both at local and international arena, the case of Non – Communicable Diseases and the impending health crises on the global health system because of them has been able to gain increasing attentions.

Mathiwos Wondu-YeEthiopia Cancer Society (MWECS) entered in to project agreement with Initiative Africa in order to implement a project with an objective to conduct Anti-Tobacco Campaign in ten selected schools here in Addis Ababa. The project is operational in Ethiopia for six months and Initiative Africa I put aside 150,000 for the project.

We have already started implementing the project. So far we are able to approach prospective schools for the project, after discussion with the schools we managed to select the best 12 schools to be included in the project. We have also developed manual on why we conduct the project and how the project is being implemented including how to organize anti-tobacco clubs in selected schools and their function description. We have conducted launching program and consultative meetings with the school administrators and students and agreed to start implementing the project. Representatives of Addis Ababa Health Bureau and donor organization, Initiative Africa actively participated.

# 13<sup>th</sup> World Congress on Public Health

The  $13^{th}$  World Congress on Public Health lasted from 23-27 April 2012 in Addis Ababa, concluded by issuing the Addis Ababa Declaration, a call on Global Health Equity that would serve as a reference for the design and implementation of health sector goals and help accelerate the numerous efforts taking place towards achieving goals set by the MDGs in the remaining three decisive years.

According to the Addis Ababa Declaration on Global Health Equity, the Congress re- affirmed the 2009 Istanbul Declaration on Health, the First Human Right as well as the 2011 Rio Political Declaration on the Social Determinants of Health and the 2012 Bangkok Statement on Universal Health Coverage.

The Declaration asserts that every individual has the right to dignity, freedom, equality, a basic standard of living that includes freedom from hunger and violence, and encourages tolerance and solidarity. Good health and environmental protection are also included as basic human rights in the declaration. The long anticipated 13<sup>th</sup> World Congress came to an end with the Addis Ababa declaration following various associated activities, events and extensive deliberations on important health topics of the century in relation to equity.

In this respect, in his opening speech, H.E Melese Zenawi, the late Prime Minister of the Federal Democratic Republic of Ethiopia , disclosed that the universally recognized massive income inequality within and among countries causes a major threat to macro-economic and social stability in accessing health services. Speaking about the Ethiopian case, he also said that the government has been trying to tackle the problem of inequality both from the income and health perspectives by providing free primary health care services to 90% of the population through the health extension program that the country initiated.

In discussing global health issues, Dr. Luis Sambo, Director of WHO-Afro office on his part, said although major advances have been made in the health sector, more than a billion of the poor have not benefited.

The congress is already being celebrated as a land marking success for Ethiopia and Africa having attracted more than 3500 health professional from around 116 countries.

The congress was able to harness the synergy and strengths of innovation and experience from the developing and developed parts of our worlds by addressing the enormous challenges and opportunities facing public health sector worldwide in making progress towards collectively attaining global health equity. During the five days long congress, a total of 40 scientific papers in special sessions, 134 oral, 550 poster and 16 panel presentations were deliberated for local and international participants who were in attendance of the event.



From left, Mr. Wondu Bekele and Luis from Canada, next to him moderating one of the sessions on tobacco control.

Mr. Wondu Bekele of MWECS actively participated in the congress. He noted that Ethiopia is facing many challenges to confront the impending NCD epidemic. Expertise is in short supply, program development is lacking, awareness is limited, and funding is scarce. And the rate of NCD is rising in urban areas. Although Ethioipia is on track with the implementation of the MDGs, Wondu believes they are not sufficient to challenge the burden of NCDs and infectious diseases which affects so

many countries in sub-Saharan Africa. Research is critical for informing the development of health policies and systems that can better address the "double" or "triple" burdens of acute, chronic, and non-communicable disease. Wondu believes that NCDs must be framed as a larger development issue and not just a health issue to address the problem and give the issue the attention it deserves.

The 14<sup>th</sup> World Congress of Public Health will be organized in Calcutta, India under the theme "Healthy People, Healthy Environment" from 11-15 February 2015.

# **CCRDA celebrated its second Good Practice Day**

Modern civil associations began to emerge in Ethiopia during the 1930s as a factor of urbanization and economic development. NGOs began to appear around 1960, when neither the various self-help groups found in all levels of Ethiopian society nor the government was able to meet the growing demands of the population. A law to recognize and regulate NGOs was passed in same year in 1960. Most international NGOs started operation in Ethiopia in response to the catastrophic famine crises of 1973–74 and 1984–85. During the initial famine of 1973–74, various groups engaged in relief operations formed what became known as CCRDA (Consortium of Christian Relief and Development Association), the first NGO umbrella organization in Ethiopia.

NGOs play significant role in addressing the country's complex development agenda that is measurably expanding. By 1998, some 240 national and international NGOs were officially registered with the government. The total number of registered NGOs in year 2000 was 310 of which 120 were international NGOs. Clark, J. 2000:4.In 2007, there were a total of 2,305 registered NGOs excluding NGOs registered at regional level. Local NGOs accounted for 75% (1,742) of the total, while International NGOs were 234. There were also149 professional associations and 125 civic advocacy groups. Between 2004 and first half of 2008 the total foreign currency transferred by NGO's amounted to US\$1.78 billion. The bulk of NGO resources have gone into human development (health, education, child welfare) and agriculture and food security. The ad Hoc CSO/NGO Taskforce, 2008.

Consortium of Christian Relief and Development Association/CCRDA/ celebrated its second Good Practice Day on June 7, 2012 at its Kality Head Quarter. H.E. Mr. Hailemariam Desalegn, Deputy Prime Minister and Minister of Foreign Affairs /at present Prime Minister/ was Guest of Honor. Several Ministers, head of government and non-government organizations and members of the consortium attended the program. Wondu Bekele, being member of the Steering Committee, actively participated and finally given merit of certificate for his valuable contribution and participation.

Although the civil society sector has more than 40 years of existence in Ethiopia, its all round contribution remained to be distorted and at times controversial. Some of the reasons contributing to these are the sector's failure to promote its contribution to the national economy. The lack of reliable information of the contribution of the sector to the national economy has resulted in the creation of the gap between the sector and the public at large. At times, irresponsible and malpractice of the very few civil society organizations out weight that of the many charitable organizations significant contribution towards the country's overall development.

Despite the multi-billion Birr worth contribution to the national economy, the government seemingly hesitates to accept the sector as the third reliable partner next to the public and the private sectors. We, in the civil society sector, strongly believe that the sectors failure to promote its contributions and present its true picture remained to be one of the weaknesses and which in return highly affected its relationship with the government and society at large. To change the existing distorted picture the sector needs to conduct various continuous and concerted promotion and public relations works. Awarding charitable organizations demonstrating credible good practices is one of the options at hand.

According to the set time table between selecting the winners and producing draft documentary film was less than four weeks time. Over and above the actual hectic engagement in the business, the pressure from the donor's side was incredibly pressing. The only way out of this deadlock was to review and the findings of the Ethiopian Quality Award (EQA). The committee members taking in to account the gravity and sensitivity of work at hand came to believe that developing objective parameter is one of the best ways to select best performers. Accordingly, in its first meeting, the committee came up with the idea of developing objective parameters to assess measure and grade the competing organizations as per the Terms of Reference (TOR) of the Consortium. By mere convenience the parameter the Committee developed happed to be similar to that developed by the CCRDA and the EQA and this contributed a lot to agree on the final outcome.





From left, Wondu together with the members of the working group & with members of the association.

The SC had series of meeting sessions to carry out the tasks and responsibilities given to it. All the sessions discussions and the conclusions reached have been systematically documented in a minute and the members have signed. The series of minutes are presented as part of this activity report.

From the outset, the SC members have agreed to conduct these tasks in the most credible and honest manner. All actions are believed to be credible with tangible facts and figures and evidence-based free from an error that is humanly possible.

The SC after attentively listening to the briefing given by the EQA officials on the overall processes of the data collection process and the assessment they made, there was a need to verify the result of the findings of the EQA. After reviewing the different alternatives, the SC decided that visiting at least 5 of the outscored competing projects and seeing what is on the ground was a mandatory step. The SC without taking more time organized itself into four working group and left Addis to see the real picture of each of the good practices of the selected organizations.

As stipulated, short working visit to the project sites not only enabled members to verify whether what has been reported exists on the ground or not, but it also created conducive condition to verify each of the parameters. Thanks to the working visit the SC have comfortably checked every point and in some cases disagreed with the points given and in one case we were forced to disqualify one contending organization which was in the leading position. After the working visit members gathered and reported their findings in written form and some members also produced pictures and films.

After attentively listening to each report the SC decided on the need to select the best performers and placed the result in the descending order. Later on the grading the SC gave different opinion from that of the EQA grading points. Taking in to account the technical functions and responsibilities bestowed to the EQA, the SC members decided the need to call joint meeting of the two working groups and do the verification work together. Without further delay, the joint meeting of the two groups (SC and EQA) listened to the report of the working visit and the result proposed was unanimously agreed upon and it became the final result the good practices of the competing organizations.

Based on these factual premises, the CSO sector member organizations have declared its commitment to become actively involved in assisting the government and the society in every possible way, to help make a difference in the outcome of nation building. This partnership relation and the readiness in the parts of the civil society sector to take part in the national development effort fill the gaps that the government alone could hardly manage.

Five winners at national level and another five winners from Urban Development Forum were awarded certificate and cup by the guest of honor. The steering committee members were also awarded a merit of certificates for their wonderful contribution and transparent work. All stakeholders and the civil society at large were informed about the work done by the SC and the completion of the selection of 5 winners for the year 2012 good practices. The selection was carried out among the 45 competing organizations who willingly applied for the competition. These organizations were selected from among the 360 CCRDA members. Due to this the best practices the SC selected need not necessarily reflect the best practices of the entire CCRDA members.

# **Establishment of Health Forum**

In most part of the world, CSOs have played key role in improving the health status of the population and access to health services. In Ethiopia, CSOs were able to introduce cost-effective, need based and flexible health and programs, and their flexibility, autonomy and responsiveness allowed them to provide timely and effective primary health care services.

There is a huge diversity among operating in the health sector in Ethiopia. They differ in terms of programs, priorities, goal, international linkage, level of experiences and program expertise, profile of target population and source of fund, and scope of geographical/ programmatic coverage.

Although, CSOs provide paramount contribution for the health sector however, there is lack of comprehensive data or evidence to show clearly the contribution of CSOs operation in the health sector. This is mainly because of lack of well-organized/forums which tries to bring the sector actors together.

Preciously under CCRDA there was health working group which has been a very good platform for the sector. However, after the restructuring of the CCRDA there was no separate forum or working group that deals with health. It is possible to say so far the intervention and representation of in the health sector is yet minimal. But the issue of health goes beyond other interventions as it includes HIV/AIDS, which cannot be fully covered by the existing other CCRDA Forums.

Currently, around 260 members of CCRDA are engaged in health related interventions. However, there has not been a health Forum at CCRDA level so far. This is regrettable as it created a gap in the coordination and harmonization of the various activities of CSOs that are involved in the health sector.

Even some of the initiatives that were started during the previous CCRDA structure, like developing some technical standards, profiles, etc. were seen to disappear. This has significantly contributed for the invisibility, less representation and reduced advocacy role of in the sector. At this point in time, however, the current health situation and the ongoing efforts require coordinated efforts of for maximized contribution to the health sector development program.

Therefore, the forum will represent all CSOs working in health to share relevant information and experiences in order to contribute for better coordination and collective impact in health sector. The forum will pursue a mandate to deliberate on and negotiate health policy matters—with concerned government offices and development partners mobilize the much needed resources to the sector. Hence, this by law is, therefore, to define the objective, structure, role of forum focal person, areas of engagement of the Health Forum under CCRDA and work Plan of Action for 2012/2013.

The main purpose of the Health Forum is to coordinate and represent the collective efforts of CSOs to contribute towards the achievement of the national health sector development.

# **Specific Objective**

#### To:

- Improve and strengthen the CSOs partnership with Government and other alliance.
- Create a dynamic synergy in the national health program planning.
- Share the best and innovative practices of CSOs and information sharing.
- Represent the broader CSOs and their common issues to the national and international health platforms.
- Build strong alliance with other forums and networks at national and international level.
- Support operational research to generate local evidences.
- Generate resources to support the Forum secretariat and build the capacity of forum members and their engagements.
- Promote lobbying for health need of community development.
- Create an enabling environment and CSOs capacity to participate effectively in policy dialogue and health strategic planning.
- Networking and build partnership among members for better coordination and collective impact in health sector.

MWECS is proud to be one of founding member of the health forum and its general manager, Mr. Wondu Bekele is voluntarily working as member of the executive committee of the health forum. The launching program of the forum will be held at the first week of February.

# **Code of Conduct**

Code of Conduct Committee, formed by the free will of members of the Consortium of Christian Relief and Development Association/CCRDA/ for years struggled to survive and justify its existence. In its several years of existence it was organizationally and financially so weak, forced to operate in very difficult situations. It was unable to respond to the various grievances and questions presented from member organization and it was not in a position to enforce its rulings neither, due to lack of legal personality and willingness from members.

Thanks to Dr.Messhesha Shewarega, Executive Director of CCRDA and his team, new effort was initiated last year. In addition to various consultative meetings held by members, consultant was recuirted to develop various documents and structure of the committee. Finally the general assembly of the founding members of the code reviewed and approved the article of association and structure. We at Mathiwos Wondu-YeEthiopia Cancer Society are proud to support the long-awaited initiative and have been serving as a member of the board and one of the five founding members of the code of conduct. We strongly believe that the code of conduct will enhance the confidence of the government, private and the general public on civil society sector and encourage the civil society organizations to operate in a more transparent and accountable manner.

The code shall have the following objectives:

- 1. Promote adherence by charity organizations working in Ethiopia to generally accepted ethical standards and operational norms;
- 2. Protect the credibility and integrity of charity organizations operating in Ethiopia.
- 3. Improve the quality of services provided by charities through the adoption of high standards of conduct and to devise efficient decision-making processes;
- 4. Enhance communication and collaboration between charities and the various stakeholders:
- 5. Improve the performance of charities by encouraging the exchange of experience and learning from proven best practices;
- 6. Maintain and enhance ethical standards, ensuring public confidence in the integrity of signatory organizations and strengthening the quality and effectiveness of their programs;
- 7. Strengthen signatories' internal governance structures and therefore make them more democrat, transparent and accountable to their stakeholders.

At times, irresponsible and malpractice of the very few civil society organizations out weight that of the many charitable organizations significant contribution towards the country's overall development. We strongly believe that the establishment of the code of conduct will encourage civil society organizations to work in a more transparent and accountable manner and this in its turn encourages government, private and the general public to trust and consider CSOs as a third reliable sector, next to public and private.

# Formation of Consortium of Ethiopian cancer Associations

Until recently, there had not been a national strategy or program that ensures the effective and efficient utilization of human or financial resources for the prevention and management of chronic diseases in Ethiopia. Due to these all NGOs working on NCDs in general and cancer in particular have been struggling to survive, without a meaningful support from within or outside Ethiopia.

Lack of awareness is another big problem here in Ethiopia. There is lack of awareness about the magnitude of the problem in the country. There are also stigma and misconceptions about cancer; that all cancers are incurable. There is little work done, to date, to promote the awareness that most cancers can be prevented, can be cured if diagnosed early, and quality of life of patients can be improved even if the disease is diagnosed in advanced stage. After several attempts, Ethiopian Cancer association ,Cancer Care Ethiopia and Mathiwos Wondu-YeEthiopia Cancer Society agreed to form Consortium of Ethiopian Cancer Associations/CECA/.

The article of association developed by Mathiwos Wondu-YeEthiopia Cancer Society reviewed and developed by the joint committee formed comprising of the three organizations and referred to the general assembly meeting of the founding members of the consortium expected to be held soon.