



*FTMS*  
*Filipino Tribe*  
*Mission*  
*Sweden*



# NEWSLETTER

No.3 2011

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## PREFACE

During the month of October Thor and Jovelyn Klaveness has been in the Philippines, and in this issue we present some of the updates which has been done due to the work of the organization to aid in different ways among children, youth and various tribal in the CARAGA region on north-eastern Mindanao.

It has been an eventful month when we has seen several projects been launched. We have also followed up the godchildren in the province of Surigao del Sur, and renewed our commitments on aid to the Mamanwa tribe in Taganito and Adlay. **TMC**, Taganito Mining Corporation has now completed the extraction of iron ore in one of the indigenous areas that was restored for the shapes to move back. In connection with this, **FTMS** has, through Thor Klaveness, got the opportunity to be a partner in the work to assist to medical care. **FTMS** has too, a small account for some assistance to education, but since **TMC** now has withdrawn, the responsibility for the education is overtaken by **NCIP**, National Commission on Indigenous People, that has not yet found a replacement for Edelina Peraz, who has been the teacher of the tribal together with Melly Dagasdas during many years. Edelina and Melly are now transferred to the office of **TMC**, called CRO, Community Relations Office, which is an office for relations between the local citizens and the mining company.

We have also restructured the work of **FTMS** in the area to secure that the aid reaches its purpose. A restructuring that started already in 2009, after we experienced the tragedy by working in areas with significant illiteracy, enabling people with vested interest can create problems in the attempt to make contributions to their own benefit, called corruption.

# 1. Updates of projects 2011/2012

Below is shown some projects, which we during the years of 2010 and 2011 raised money for and are now made. Here, you can now see how your contribution has made very useful and have been to the great joy to many people.

## CYP1101 Cornea transplantation to a blind girl in Mamanwa



Marit Zalazar, 16 years old, was only twelve when we got to know about her problem, post-measles keratitis, which is a sequel of vitamin A deficiency in connection with measles. The Philippine people are known as a fishing people, and it seemed only unrealistic that someone could get just vitamin A deficiency in the Philippines since fish contains vitamin A, and therefore prevent this disorder.

Mamanwa tribe, to whom Marit belongs to, lives in mountainous areas, and has not fish as a staple food, but lives on the fruits, plants and animals that exist there. It turned out that precisely Mamanwa are badly affected by differently, to us, common diseases, since they do not have enough preventive protection. In the case of Marit, her left cornea was already covered by a spot that has grown out due to this vitamin A deficiency, while her right eye were still able to medicate, e.g. with increased dose of vitamin A.



The reason to that the treatment of her eyes was delayed, has not only been one but several problems, which also points to why our assistance is wanted.

Mamanwa has, as one of the few remaining tribes, own medicine men/women that treat their ailments, according to old traditions. In most cases there exist not a thought about asking for help in any of the many existing health centres in every municipal, without using their own herbs and sophistry.



The tribal has also not training or knowledge enough to know how they can get the expert help that is available in society, and in fact many times without extra costs for them because they are protected by legislation as nature folk. This also means that they are sensitive to rumours that the child would be kidnapped for adoption, or that surgery could be fatal for the child, give such consequences to parents that they does not dare to receive featured treatments.



Thanks to FTMS long-term quest to give tribal part of this knowledge, **FTMS** has, through its representative Thor Klaveness, conducted negotiations with the Mamanwa tribe, and implemented different levels of training for Chief, medical men/women as well as parents, in cooperation with local municipality Offices, **TMC**, and **NCIP**, and thus increased the understanding of how, in this case, the girl can be helped to get her vision restored.



A remaining problem to complete this treatment has, too, bent the financing, but thanks to individual contributors, and a greater contribution from a company in Malmö, Sweden, could this project become true in February 2011. Unfortunately, they transferred at this time the teacher of Mamanwa in Taganito, Edelina Peraz, from her position as an adult and youth educators to inner Office service at the office of **TMC**, in order to work with other internal data in the relational operations. This movement created temporary confusion because Edelina was the person who had the principal contact with the family in this matter, and now we needed to build up confidence to a new person so the parents would dare to undergo treatment for their daughter. When Thor Klaveness came to Taganito in October, had an assumption of responsibility been made to **NCIP**, why Thor approached them, to ask help in continuing negotiations with the family. This negotiation took place on Thursday, October 20 in the village of Mamanwa in Taganito. Participants in the hearing were from **NCIP**, head Evelyn R. Maceren and Manobo Chief and **PMF**, Pastor Elpedio A. Montenegro, from **TMC**, Edelina Peraz and from **FTMS**, Jennifer Y. Urquia and Thor Klaveness.

## The negotiation results and initial measures



At the hearing with Marits family it showed that the parents wanted to help their daughter, but was worried about the end of treatment. The family was invited to accompany their daughter to **DMC**, Davao Medical Center for encouraging, but also as a witness to that the treatment was given as told.

Thor Klaveness, who already in 2009 visited **DMC**, could explain the process at a cornea transplant, and it was decided that Thor, already the day after, Friday October 21, should visit Dr. Jaimenito Go to get a medical certificate to present to the ophthalmology department in Davao, in order to allow a cornea transplantation or other appropriate measure. It was also decided that **NCIP's** director in Bad-as, Surigao del Norte should follow as an interpreter and make sure that the girl had necessarily documents needed for registration and treatment at the hospital.

Thor Klaveness visited Dr. Go following day, and it was shown that even Dr. Go would visit Davao over the weekend, why they agreed to meet in the hospital in Davao when the group would arrive on Sunday evening.

The following is a report from Thor Klaveness about his experiences during the trip to Davao to initiate the treatment of Marit.



Already at 5 am, Sunday morning, I took the bus to Bad-as supposing to meet the patient with mother and Evelyn in fellowship.

The journey to Davao from Bad-as is approximately 400km and came to take eight hours. We enjoyed our time together and since the journey was long, it was lot of time to know each other more, and talk through what would happen.



When we arrived at 4.30 pm to Davao, we went directly to **DMC** and booked rooms on their Dormitel. I sent SMS to Dr. Go that we had arrived, and he came at 5.30 pm to meet his patient for a last check-up before tomorrow's registration to **DMC**. Dr. Go wanted to see that his treatment of the minor damaged eye was successful; he was initially worried that both eyes needed transplant, but it showed, thank God, that the eye was almost normal. Still a spot is visible, but it doesn't seem to hinder the sight of Marit. Her left eye was classified as blind, and was, as Dr. Go expressed; a good candidate for transplantation.

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Dr. Go where in Davao by the reason of a big family reunion, and it was fantastic that he broke off his engagement to give time to his patient Marit. This he made completely free of charge at his own leisure, and appeared together with his wife and children.



In the same building as the Dormitel, the lunch restaurant of the hospital was located, this too, kept open in the evening. This was convenient for us, then we could get a late dinner before we went to bed.

Dormitel is a kind of hotel in hostel style. In each room where four bunk beds with space for eight persons in total. We paid for each bed, women and men in separate rooms.



## REGISTRATION

I want here to describe the process that happens when you register in the hospital. It is difficult to otherwise understand how cumbersome it is compared to what we are accustomed in the Nordic countries. First of all, we will have a registration form adapted to what we announced that we want help at the hospital.



NCIP head Evelyn R. Maceren was helpful during the entire registration process. Here she fills in the patient's all the information required for further treatment.



The form is submitted for registration in the hospital's computer system.



After a number of queues, we must now sit down for a while and wait for the announcement that the patient is registered.

When the patient is registered we stand in the queue again to be registered to the appropriate Department and become scheduled.



Once again we are lining up, now to pay the examination fee.



When this is paid, we can go up to the hospital's ophthalmology and wait for the patient's name shall be called up. It may take a few more hours of waiting, depending on the number of registered patients before us.





## EXAMINATION

Normally, the patient must not include any person on the investigation, but since we are dealing with a child from a tribal people who have not language enough or experience of hospital, the patient was admitted to bring her mother for convenience, and the interpreter, Evelyn, to ease the communication between patient, nurses and treating doctor.



Marit had to sit in the queue waiting her turn for a first vision test. Marit has done this test before in Surigao city, 2009, that time assisted by Dr. Go.

It proved a difficult task for the staff because the patient was not really sure on alphabet. It was switched to a symbol board with a symbol that looked like an E, with the opening facing up, down, left or right, but it turned out that the patient does not understand right and left. Because the staff became frustrated and losing patience, the patient became worried and nervous, why vision study partly came off. I spoke



with departmental safety officer who regretted nurses' lack of patience, and I explained the patient's long road home and wondered if we could be helped in order to smoothly move forward in reading because we already had a medical opinion about transplantation.



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Department safety officer spoke to one of the doctors in the Department and we moved to various treatment rooms where two doctors helped alternately along with some impatient nurses. To see the reaction of the nurses was interesting as they more resembled that of the giggling secondary school students than trained nurses.

An interesting observation since this is needed to move forward with continued aid. We can see a lack of experience regarding hospitals workers treatment of patients with different cultural backgrounds. An experience, which in all cases, the Department safety officer, and the doctors, were grateful to have the opportunity to confront for continued service.



Reading continued painlessly and everyone began to relax, more information was given and a more relaxed relationship began to prevail.



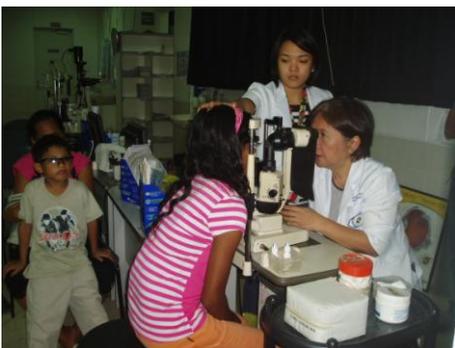
It was clear that the mother had the great joy of the experience she gained when she saw her daughter's process by various screening and tests. She saw that other patients of all ages, from young children to old pensioners received help in different ways to restore their vision.

She began to realise that there is hope for her daughter and we could see a smile slowly began working her way in her otherwise serious face. For the first time she relaxed.



The big breakthrough came when she met an elderly lady from Siargao. Siargao is an island group in Surigao del Norte, and thus the Lady spoke the same language as the mother and daughter. When she saw how this older woman was to test out new lenses for spectacles, her interest deepened, and she involved in a deep conversation with this woman.

Her first words to her supervisor from the **NCIP** were that she wanted her husband would have come up with next time. She had now realized that her husband's cataract was curable.



We had the luck that a specialist, regarding chirurgical operations in the eye, was available, and we were scheduled till after lunch, at 1 pm, when she received us for an evaluation if transplantation was possible, and in such case, continuous tests of necessity.

It was interesting to observe that not even the **NCIP** staff was accustomed to this type of assistance. She was so tired of this morning that she slept over the booked time and I got to run over the hospital to get the patient to continue investigation.



Under the auspices of the eye specialist then the surgeon looked on the eye and we discussed the implant procedure and what is needed for preparations.

It was decided to scan the eye to make sure the eye behind the cornea was not damaged but a transplnt would indeed imply that the girl had her eyesight back.



After the decision followed a series of studies to ensure that the eye was otherwise healthy. At the image is seen an ultrasound examination, which was followed by a series of scans.

It was wonderful to hear that her eyes are healthy and that a transplnt is possible. Now remains only the last details, ordering a cornea and to maintain confidence from Marit's father in order to perform the operation when the time comes.



## DSWD SOCIAL ASSISTANCE

To my great surprise, and despite being told that there were social workers at the hospital which would help to ensure that the costs to society will be paid, we were sent first to the District social office. Eventually there, we were sent back to the **DMC** to find their social Department.



As soon as we got there, where we had a wonderful reception from a staff that knew everything about what was needed to make life at the hospital good for visitors as tribal's. She told that the hospital even had its own aid and that there was a special House available where the family could live and cook their food. Accommodation and food was the hospital's assistance programme, while various administrations, such as **NCIP** and **DSWD**, pay for the cost of implant procedure. Possibly, we can also apply to have the cornea paid through the assistance programme.

It surprised me that **NCIP's** representative was not prepared for the practical questions that always follows when tribal should have this type of help. This is one of the problems we face in the poorer provinces in the absence of financiers and interest, one of the reasons for this lack of interest is the vaunted horror for Mindanao depending, among other, the worlds press standing writings on terror and murder. A writing that is killing more due to the malnutrition it causes than all terror and traffic accident's causes together!



With the new wonderful news that the treatment may be carried out at a lower cost than estimated, we considered the day to be over, and in retrospect it may even with luck be money to further projects for the tribe in Taganito.

Already we have begun to talk about cataract and other treatments, more about this in another article of this newsletter.

In the picture above is seen Evelyn R. Maceren, head of **NCIP** Bad-as, Marit's mother, the patient Marit herself, and Thor Klaveness who represent **FTMS**.

As a footnote, we want to explain that in the Republic of the Philippines is the normal spelling of Marit's name Marith or Mareth, but since Marit self signs with this spelling, we decided to spell her name as she writes it.

## CHP4051 Teaching to the Mamanwa Adlay



In connection to Thor and Jovelyn's arrival to Adlay, the mother of the Chief contacted Jovelyn and wondered if **FTMS** could continue its aid through teaching as they had initiated since before. It was shown that the teaching they were promised did not work well, since the teacher from **DepEd** (Department of Education) adult education, did not show up at the times she herself had set, why the adult lost their salaries while waiting for the teacher, while they could have been working in the local mine.



Thor Klaveness contacted village Captain, Charlita Cabadonga, who approved the request of Mamanwa to receive teaching from **FTMS**. In connection with this agreement, it was decided that the sister of Jovelyn, Ms Juralyn Urquia, that has some teacher training would begin training to the Mamanwa with immediate effect.



One of the problems encountered in Adlay is that the tribe, due to its rapid expansion of the permanent tribal residents, also become attractive to local politicians who want their voices, and lately a Norwegian pastor who wanted to show that he can help them, but as the Chief said: there are many who come here and talk, but it has not happened slightly since you last was here.

We have therefore, starting from 31 October, started full-day teaching about eight hours every Monday. The Village Council has promised to repair and equip the tribe's 'gym' with a blackboard.



Baliling and Tatang are two of the students that **FTMS** has given breakfast and lunch every day they has studied at the elementary school. Due to all false promises, and the uncertainty whether they will be enforced, the parents has quit to wait, which meant that children left school and started to help out with various jobs to enable the tribe to reach food.

Jovelyn has convinced the tribe, and is doing anything to encourage all the youth to take up education again. **FTMS** are prepared to immediately from the first school day start by cooking for those students again when that happens.



Jovelyn Klaveness shared even out clothes as godparents and sponsors donated via **FTMS** to Mamanwa. It was a nice opportunity to meet the tribe all families where they tried out different clothes and talked about various things they had in their hearts.

It was also the clothes to the men of the tribe in the form of shirts as they may have at representative occasions.

Jovelyn also had the opportunity to speak with parents and Chief about their children's education and the importance of nutrition.



### **Kids Club Adlay**

In Adlay, **FTMS** has, since 2009, ran a Kids Club with help of the godchildren's parents.

The initiative to this club came in connection to that a previous Director proved to misappropriated the money, which would be used to the godchildren, and through a decision by **FTMS**, a new account was opened in the name of **FTMS** already in August 2010, why all the money that been embezzled was recovered and began to be used by the new Club.



The work in **Kids Club** is that the parents help in tours on their own schedule every weekday to cook a meal to the godchildren and Mamanwa's students in primary schools.

They are pulling together to find new solutions to what ingredients needed to give a good nutritious meal. In this work we are in need of more volunteers who can help by suggest menus and canteen methods, since this is a growing cohort of children, both in number and body size.

### **CHP4051 and CYP1050 School meal program for students from Mamanwa and godchildren**



As mentioned earlier on previous page, there is a project in which we give meals every weekday to students from the Mamanwa tribe and our godchildren. The reason that this projects has been started up by **FTMS** was the chaos created in primary school when the children of Mamanwa started but the parents did not sent any food with the children.

This is a way to give parents without experiences the possibility to learn new receipts and get ideas what is needed in a meal, how to cultivate own herbs and vegetables, and what to purchase.

In cooperation with **Kids Club** and **MSWD**, Municipal Social Welfare Department, the parents receive the information needed to have a sustain support to their families.

In Adlay exists, we discovered in a research in October 2011, a large number of starving children from families that do not belong to any particular tribe. This cohort of children is too large to our current economy to cope with this now, but we initiate, which we tell more about further in this issue, a new school meals project where we hope you want to be involved in the search for more sponsors and godparents.

The sponsoring fee refers to approximately 300 peso a daily meal in school for each godchild (12,50pesox23 days/month). If you would not like to be godparent, you can pay any amount of your choice per month to our project number **CYP1050**. 12,50 peso equals app. 2 SEK (€0,22) per meal and child, and every 50 SEK (€5,5) gives a child one month's meals.

## CYP1100 Medical projects in the provinces of Surigao

During 2008, Thor Klaveness held a number of meetings with doctors of internal medicine, above all, to find a solution to preventing the occurrence of Diabetes and Tuberculosis. Of the ideas that came from different doctors, among other, Dr Pasaporte, Iloilo, there was the idea of a network of doctors who gave four hours per week of free consultations and time to treatment, this in order to give the poorest treatment and information in the fight to combat different types of commonly encountered diseases, but also alleviate the effects after an accident.

This vision show to grow in the mind among several of the doctors we cooperate with in the CARAGA region, and has now given visible results, where we gives people a better life and better condition to cope with their everyday lives. We tell about some of these below.

### - Treatment of cataract and other eye diseases



At a negotiation with parents to a girl in Mamanwa tribe, it shows that the father suffers sight problems and internal diseases. Since it is very hard to explain to tribal what it means to cure a symptom or heal a wound, Dr Jaimenito Go raised a suggestion that can revolutionise treatment problems with Mamanwa.

In connection that Thor came back to the provinces of Surigao after his tour with the patient, who is in need of a cornea transplantation, Thor got almost immediately a call from **FTMS** co-operator, Jennifer Urquia, who told that the mother of the girl has called, telling that the father had changed his mind about letting the girl have her transplantation to get her sight back. The situation looked again very critically and the representative of **NCIP** was completely paralyzed because she was not familiar with how these operations are executed.

Dr. Go himself called in this moment, the family, and talked to both parents, while he got following idea: let us treat the father's cataract and possibly others who have eye problems in the tribe, and when they see the results of the treatment, they will understand what the girl needs!



It sounds maybe both trivial and complicated at once, if they see the good results it is, they can rely on our knowledge, but who will foot the Bill and who will be able to implement it?

Dr. Go told that **SMC**, Surigao Medical Center in Surigao City usually have a mission in which a number of patients are surged every year to cure their cataract, he told further more that the Mamanwa tribe never had been included during this missions, why he offered himself taking the responsibility to effectuate needed examinations, and having **SMC** approve surgeries needed. He also said to take the responsibility to handle the negotiation and cooperation between family, hospital and doctor, both cases of own patients and these going to Davao.

After that Thor discussed with Jennifer and Jovelyn it was decided that Dr. Go will be advisor in these cases regarding the cornea transplantation in Davao, and treatment of eyes in Taganito. We set up a relationship between Dr. Go and Jennifer, now together ensures that finance and treatment go hand in hand. Jennifer is responsible for ensuring that all bills are paid and to report back to **FTMS**.

## - Eye check-up in cooperation with Vision 2020



Dr. Cris Buniel is an optician, and works to help people with sight problems in Surigao del Sur. He has own clinic in Cantilan municipality, and a room at the provincial hospital in Madrid municipality.

He has got his equipment to the hospital in Madrid through an American ophthalmologist from Virginia, where initial diagnoses to patients can be set. Either get them on to the treatment of ophthalmologist or get glasses as they are helped by.

In 2008 when Thor Klaveness met Dr. Cris Buniel the first time, Cris remembered the idea from Dr. Pasaporte that can give four hours per week of his time, free from charge, can be an important part in the development of the health situation of the poor. Cris has since then created a network of doctors in Surigao del Sur which he now offered to **FTMS** in the work to reach out to the poor and tribal. Cris, who is a doctor, has too accepted being a contact person to patients in need of treatment in larger hospitals, such as **German Doctor's Hospital** in CDO, Cagayan De Oro City. He will look to that all samples and preparations for treatment are correct and that the patient fulfils the conditions imposed by the hospital.

## - Operations in hospitals, among other in cooperation with German Doctor's Hospital in CDO



In the light of that **FTMS** previously sent patients to CDO for surgery of Cleft Lip under the organization name: Operation Smile, Thor decided to visit those hospitals which can be helpful with this in the future, and make some personal bindings to be more effective in helping children and youth.

Thor got to know that German Doctor's Hospital is not involved in the Operation Smile's program, since Operation Smile is renting space in other hospitals during their scheduled time in an annual frame, but that German Doctor's hospital can be helpful

in the same purposes, but during the whole year and not by term.

Thor got contact data, and as mentioned in the article above, Thor has later found contact persons for Surigao del Sur in Dr. Cris Buniel and for Surigao del Norte in Dr. Jaimenito Go as regards follow-up and preparation of patients. It is not that ophthalmologists tackles patients in person where they belong to other areas, but they make sure that the patient really undergoes, and receives the help needed, thanks to the network of doctors they have in their areas.

## - Dental care etc.



Dentist Jane Schuss has through her clinic in Malmö, Sweden, sent instruments to the Philippines via **FTMS**. These instruments are now assessable for requisitioning by those dentists which intend to execute dental mission in the CARAGA region.

An interest has been told from **Arise Ministries** who give aid to the Higaonon tribe in the provinces of Agusan del Norte, Bukidnon and Mizamis.

All equipment that **FTMS** receives, are stored among our partners. For additional information please contact Thor Klaveness or Jennifer Urquia.

## 2. Coming projects 2012

During 2012 we have a number of projects to be executed. Some has already started while some is under calculation, but we will however mention about them since we are in big need of sponsors for several of these projects.

### CYP1101 Cornea transplantation to a blind girl in Mamanwa



Reading in order to ensure that Marit get back her sight through transplanting a cornea will be completed.

We are working continuously on ways to keep the mood up in all involved and that the girl's dad will not change themselves more times without letting Marit get her sight back. An operation she has been waiting for in three years time now.

Upon completion of transplantation, **DMC** will investigate her new cornea once a week. Since the distance is 1000 km t & r between home and the hospital, the hospital has offered the girl to live there with a relative for free and with food included the first month after operation.

Thereafter, the checks to be carried out every third month, is taken over by ophthalmologist Jaimenito Go, **SMC**, for continuous treatment.

Only after a year of investigations, and provided that the cornea is not rejected, the patient can be explained healthy. It should be specified, however, that these tests are painless since it involves checking corneal elasticity and adaptation as well as instilling medication in eye on these occasions.

### CYP1050 School meal program for starving children



A certain niche of our project for school meals was shown after Jovelyn Klaveness made a follow up on our agreement with the primary school and High School in Adlay, to see if we can proceed in this program.

It has, since **FTMS** launched its work in the Philippines 2005, been a target that every student shall receive at least one meal per day at school. The thought is that parents will volunteer in cooking the food, but also through this knowledge give their children breakfast before school starts, which is not obvious today that they do.

At Jovelyns meeting with headmasters of both schools, new alarming figures show up. Of the elementary school's 815 children (which is estimated to 875, by year 2012), 90 children are starving every day. On High School it was said that 20 % of the children are starving, which are 70 by the 350. School directors said it is much more important at this stage to get started with breakfasts to these 160 children than to invest in a school dining hall, why **FTMS** was asked to calculate this.

Based on the numbers, given by Thor Klaveness from Maam Charlita Montenegro at **MSWD**, Carrascal, we has calculated that a breakfast meal to all 160 children would cost app. SEK 9 000 (€1,000) per month.

With the increased number of students who become after mining got underway and several thousand people moved in for the sake, calculates a full-blown meals cost SEK 40 000 (€4,400) per month.

**FTMS** has decided to try to find sponsors for a breakfast program, in which every sponsor will bind himself for three years term with an amount from 50 SEK (€5,5) and up per month.

## CHP4051 Intensified educational program jointing tribal and other people



Jovelyn Klaveness has during the month of October, 2011, organised a launching of the teaching to Mamanwa, after that Thor Klaveness got a clear sign from the Chief of Mamanwa that they wanted a functional, continuous education. Thor made at that point a contact to Charlita Cabadonga, who is Barangay Captain, in Adlay.

Mrs. Cabadonga promised to restore the shelter at Mamanwa's place, which is only a roof on four poles, a certain cover for rain, chairs and a blackboard. During time waiting for this restoration, Juralyn Urquia launched the teaching, which is held eight hours every Monday.

We know that it takes more of a teacher to teach Mamanwa than ordinary teachers usually do, since Mamanwa has no academically culture to sit still and take part in teaching. The teaching will be interspersed with practical exercises and excursions to make learning more interesting.

This education in which **FTMS** helps, aims primarily towards the parents and adults that have the ability to participate. Children are allowed, but as soon as they can be regarded as capable of teaching in primary schools, they will be transferred there.

The hardship to teach Mamanwa is not the tribal themselves, but all people surrounding with different motives to stop or be a part in the education. Some problem can be that:

- It can be politicians proving they care about the tribal and therefore engage to gain votes. The problem is that they forget about their engagement as soon election is over, and is not coming back until next election.
- It can be citizens in the village that are afraid that the tribal will take the job away from them, and therefore in different ways is sabotaging the education or threaten the teachers.
- It can be other tribal that is worried that the money shared through the local government and **NCIP** not shall be enough and therefore tries to force the tribe to leave.



Above are some of the problems we in various ways have and is trying to prevent by keeping an open dialogue with all the inhabitants, as well as policymakers and others that influence in the region. We try to show that education can help anyone and that they have the advantage of each other in daily life to take care of their livelihoods and conserve its pristine nature without too much impact. Many natural areas have been poisoned, the water has disappeared because of that the forest have been devastated and the soil washed away etc. It is a necessity to have the required knowledge to be able to exploit its natural resources but still have

safe water and clean air remaining.

Another problem that sometimes occurs is that there is an international "competition" between different organisations and people to show that they are the ones who do the most and best for the poor. This strikes the poor double since it emerges "professional" aid seeking, that attract money away from what they actually are intended for. This is possible, and has been made possible for decades, because these organizations that aids have no time to interact and learn by the local prerequisites, but with a time frame, and a budget that is needed to force through. **FTMS** do not want to participate in this endeavour to self satisfying, but is offering anyone who wants to be a part of the solution to contribute.

### 3. Changes in the Organization

Thor Johnny Thoresen has during the years of 2010 and 2011 chose to launch his own mission through a Norwegian organization, Tverrkirkelig Nettverk, Trans Denominational Network, t-net, as a missionary and student pastor at Oslo Theological Faculty.

**FTMS** has already taken steps since earlier concerning the control of the economy, but since the board of **FTMW** is action paralysed by Thoresen's action in the Philippines, we must reorganize our aid there, and would like to clearly declare the following; that Thor Johnny Thoresen, earlier director in **FTMS**, have not had any tasks in **FTMS** since March 2010. No transactions of him are done by **FTMS** or **FTMW** directive.

### 4. Who is a member in FTMS?

Members in **FTMS** are those godparents and sponsors that regularly pays a fee to the organization or members who sign up for interest and pay our membership fee.

Members are, too, the godchildren's parents, and those supported through any of our projects. The reason that they are full members is that they can participate and influence their ideas about how we can become better locally and to you that will help them to know that your help really reaches.

We work constantly with renewal, and new people see the light of day. We are in need of your support and we need new ideas to develop. **FTMS** is a non-profit organization where you are welcome to participate both as a supporting Member, godparent or as a project sponsor, but also with your own engagement in order to attract new members or help in different ways.

#### *Lectures/Events*

If you want to book us to know more about the Philippines and our work, please contact us on given numbers or e-mail as shown last in this newsletter.

Observe that we are pleased to come, if so only, for the sake of the information, for instance, the life in the Philippine provinces, and about how to help to own support. Information which can be well for use to, for instance, Swedish school youth, scouts etc.



It is you that decide the theme in cooperation with us, for instance, in connection with the UN-day, or any international engagement, or theme day at your work. School – Organization – Work, does not matter.

I ask our deepest and warmest thanks from me and our co-operators for your engagement. Please, talk with a friend about the possibility to be a sponsor to a child or to any of our many projects in the Philippines.

God's peace

Thor Klaveness

#### **Office of the Treasurer:**

Adlay, Carrascal  
8318 Surigao del Sur  
Philippines

Ekgatan 7B  
S213 63 Malmö  
Sweden

## *Sponsorship fee*

The monthly fee for a godchild is €20/SEK200 or €15/SEK150 for group sponsor and can be paid as follows:

1. By autogiro
2. By payment card/bill which can be paid monthly, quarterly, half year or own choice.

When paid within Sweden, payment can be done to account shown lowest this page.  
Payment outside Sweden but within Europe, pay to: NORDEA Sweden  
IBAN: **SE31 9500 0099 6042 0418 2960**  
SWIFT: **NDEASESS**

## *Internet pages:*

Homepage for the network:  
[www.tribemission.com](http://www.tribemission.com)

Filipino Tribe Mission Sweden's homepage:  
See FTMS in task bar  
Filipino Tribe Mission Welfare's homepage:  
See FTMW or Philippines in task bar  
Godchildren:  
See Child sponsor in task bar

## **FTMS FILIPINO TRIBE MISSION SWEDEN**

Reg. No: 802422-2393      [ftms@tribemission.com](mailto:ftms@tribemission.com)

Att: Klaveness  
Norreväg 11/46  
233 39 Svedala  
Sweden

Chairman Andreas Eklund:  
Treasurer Thor Klaveness:

[andreas@tribemission.com](mailto:andreas@tribemission.com)  
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Telephone:                    +46 (0)404 979 69  
Mobile Thor                    +46 (0)705 987 266  
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### Account information:

Pg: 418296-0  
Bg 5495-2361  
Bank account: 9960 420418 2960  
IBAN: SE31 9500 0099 6042 0418 2960  
BIC-Code (SWIFT): NDEASES

### **NOTE**

This Newsletter is written to reach people not common with the Filipino culture. To tell about the way Filipino's lives and give an opportunity to help where help is needed.

We are in no way participating in any political movements, but are involved to lift the knowledge to have patience and ability to live side by side with one another. Notwithstanding if it belongs to be to Filipino's or other.

If you want to contribute with your own experiences and/or knowledge, please feel welcome. News in our newsletters is solely based on facts from Filipino's and experiences from other within the Philippines itself. We belongs to different cultures, therefore it is sometimes different viewpoints on the news.

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Mining is now clearly seen in the Nubenta Mountains in Carrascal municipality, Surigao del Sur. People are afraid to tell what they see because of the consequences it can give to disturb the investors, but you can see for yourself the difference between untouched nature and the mining sites.

Earth on the down slopes dries out and is rising as dust clouds when shafts cars driving back and forth in an endless stream of vehicles, delivering minerals from the mines to the ships at the port. When torrential rain falls, soil is washed into the sea, the Earth's crust become thinner and important nutritious soil being washed away. Fresh water is not retained in the mountain slopes to the same extent because the Earth is thinner, leading to less fresh water for the population during droughts.

Many people tell us that they are looking a place away from the area to survive, some do not believe that the village of Adlay will remain for another 40 years. The Earth collapse because mining companies does not follow the guidelines for protecting nature for mineral extraction. Most of the municipal and regional decision-makers and major leaders in most organizations are encouraging this depletion due to their short-term profits. A graduate who moved to Manila says that he initially supported the mining, but afterward he studied at the University on how mining will be operated and would follow closely how it is operated, the person changed perception and is now a strong opponent of today's mining, with the risk of his own life.