On these pages, you’ll meet five amazing women. Their names may not be familiar, but each has made the world a better place. Good Housekeeping, in partnership with GE, honors these brave, compassionate women. They really are our heroes!

Lisa Yue
Turning grief into a good cause

Her baby had a cold, that’s all. A simple cold.

That was what Lisa Yue kept telling herself as she sat in an emergency room five and a half years ago, trying to absorb the fact that her baby son, Bryan, had just died of cardiac arrest. An autopsy showed that Bryan had suffered from a form of cardiomyopathy, a disease in which the heart becomes enlarged or weakened, causing irregular heartbeats or heart failure. The only warning of Bryan’s illness had been lethargy after he’d caught a cold.

Unbelievably, less than two years later, Lisa and her husband, Eddie Yu, sat grief-stricken in yet another hospital, saying goodbye to their second child, Kevin. Only nine months old, Kevin had succumbed to the same disease. “When Bryan died, ▶
we were told that cardiomyopathy is so rare in children, there was little chance any other child we conceived would have it,” says Lisa, 39, a former marketing director who lives in Tenafly, New Jersey. But Kevin’s disease was diagnosed just days after he was born. “When he died, I had to know: Was it terrible odds? Or was there something else going on?” Lisa says.

She devoted herself to researching pediatric cardiomyopathy. Lisa learned that although it is rare, there can be a very high mortality rate for children under five who are diagnosed with the disease. What’s more, the illness is grossly underdiagnosed; most cases, like Bryan’s, are only discovered through an autopsy.

“This is the worst condition a child’s heart specialist has to deal with,” says Steven E. Lipschultz, M.D., chair of the department of pediatrics at the University of Miami School of Medicine. “Right now, for young children who’ve been diagnosed with one form of this disease, the only long-term treatment is a heart transplant. And too many kids who need a heart die waiting.”

Belatedly, Lisa discovered that there was a possible genetic component to her son’s deaths—her husband had had a mild form of cardiomyopathy as a teenager. Although she had told her first obstetrician, she and Eddie were never referred for genetic counseling. “I’m not blaming anyone,” she says. “The truth is, many doctors don’t even have this disease on their radar. There isn’t enough awareness of it.”

Galvanized by her grief, Lisa created the Children’s Cardiomyopathy Foundation to spread awareness of the disease; she currently serves as its president. The foundation has sponsored a $43,000 study into the genetic causes of cardiomyopathy, established a tissue and blood bank for researchers, and donated $100,000 to the Morgan Stanley Children’s Hospital of New York-Presbyterian to establish a pediatric cardiomyopathy program.

Lisa has become a powerful one-woman advocate for the cause, testifying before Congress in order to win more federal funding. “Lisa’s impatience is just wonderful,” says Dr. Lipschultz, who heads her foundation’s medical advisory board. “She personifies a heroic bravery in the face of adversity.”

Happily, Lisa and Eddie have once again become parents. After Kevin’s death, the couple adopted a daughter, Michelle, now four, from China. Twenty-three months ago, after a “leap of faith” and extensive genetic testing, Lisa gave birth to their daughter Audrey, who has exhibited no signs of the illness. “It’s difficult to balance my work at the foundation with my home life,” Lisa says. “But then I’ll hear or read about how much the foundation’s work means to other parents, and that keeps me going.”

—Ronnie Polaneczky

Mary Buschell
A new view for kids in wheelchairs

Strapped to a harness, a little girl is being hoisted up to a large tree house at Trail’s Edge Camp in Mayville, Michigan. A thick rope holds her steady as a counselor pulls her higher and higher. For seven-year-old Olivia Werstein, who suffers from muscular dystrophy, it’s an exhilarating experience to be free of her wheelchair, to be looking down, not up. “I’m a bird!” she calls to the group on the ground below.

One of those smiling up at Olivia is Mary Buschell, 55, who wears sunglasses to hide her tears. “Empty wheelchairs,” she says. “This is what we dreamed about.”

Mary is a pediatric respiratory therapist at the University of Michigan C.S. Mott Children’s Hospital in Ann Arbor. What she sees in the ICU can be devastating—children dependent on ventilators as a result of pulmonary disease, spinal cord injuries, and degenerative disorders.

Mary has a special concern for the parents of her patients. If the children are able to go home, it’s often on portable ventilators, which means round-the-clock care. In 1986, she started a support group for these moms and dads and soon realized how badly they needed a break. “What if we had a camp for the kids?” one parent asked her. Mary loved the idea but fully expected her colleagues to tell...
Aubrie Maze  
Words of wisdom for teenagers with cancer

She never dreamed of becoming an author. Aubrie Maze just wanted to help sick teenagers get through their battle with cancer.

“I thought if I could help even one other person, it might mean my own experience was worthwhile,” says Aubrie, now 20, who learned she had cancer when she was 16 and has been in remission for three years. Last year she wrote the inspiring Cutting Up: Laughing & Crafting—Ideas that Helped One Teenager Through Cancer Treatment. Already, she has sold more than 250 copies of her hand-produced volume.

Equal parts scrapbook, memoir, how-to guide, and medical primer, the book also has blank pages for teenagers to chart their own thoughts and feelings. Aubrie prints each one from her bedroom computer, then binds the books at a copy store. If she knows the recipient, she’ll add a handwritten message. “This is the book I wish I’d had when I was sick,” she says. Her goal is to send stacks of them to children’s cancer units in hospitals around the world.

Aubrie was in her second year at Sonoma Valley High School in California when doctors learned that the cause of her increasingly persistent hip and leg pain was Ewing’s sarcoma, a form of bone cancer that can affect children. By the time of Aubrie’s diagnosis, the cancer was already advanced: A tumor had wrapped around her pelvis, horseshoe-fashion, and the disease had spread to her lungs.

Cancer treatment turned Aubrie’s world upside down. Chemotherapy nauseated her and caused life-threatening infections; radiation sapped her energy. Surgery to remove the tumor and rebuild her pelvis incapacitated her for months and left her with a big scar. The emotional fallout was especially tough. “Teenagers are used to living in the moment,” says Jim O’Brien, R.N., assistant patient-care manager of the pediatric oncology and bone-marrow unit at the University of California, San Francisco Children’s Hospital, where Aubrie was treated. “They’re also in the midst of becoming independent from their families. Cancer takes all that away, and they have a hard time believing there is a light at the end of the tunnel.”

Aubrie started Cutting Up as her high school senior project. It includes pictures of her at her worst—bald, weak, pale, and bedridden—and as she is now: vibrant, healthy, and
happy. It also offers practical advice on decorating a hospital room and getting through "not-so-good days," as she refers to the hardest parts of treatment. "I'm not saying to be a goody-goody," she says. "But if you can change how you view the hard stuff, even in the smallest ways, you can get through it."

Aubrie's words can have a profound effect on her readers, says O'Brien, who has given the book to his patients. "Sometimes teenagers will drop out of treatment because they want to feel normal—and by the time we see them again, their disease has become impossible to treat," he says. "This book can restore hope."

Now a sophomore at Santa Rosa Junior College in California, Aubrie undergoes scans every six months to make sure her cancer hasn't returned. While mindful that she's at higher risk for both breast and lung cancer because of the radiation she received, Aubrie feels certain her cancer is gone for good. "The only difference in my life now is that I can't do high-impact activities, because part of my pelvis is artificial," she says. "Other than that, I feel great."

She and her mother are working with a printer to mass-produce Cutting Up, and they're looking for a sponsor so that they can distribute the book free to kids who are undergoing treatment. Aubrie also hopes to have it translated into other languages. "I want teenagers to be able to see that there are gifts in every experience," she says. "Even in having cancer."—Ronnie Polaneczky

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Haregewoin Teferra
Sheltering children orphaned by AIDS

In our October issue, in the article "Hope Lives Here" by Melissa Fay Greene, we introduced you to Haregewoin Teferra, an extraordinary woman who runs a school, an orphanage, and an artisans' collective in Addis Ababa, Ethiopia. Many readers wrote to tell us how moved they were by her story.

Haregewoin's younger daughter died at age 24 after a devastating illness. For the next 18 months, Haregewoin mourned, spending every day by her daughter's grave. One morning, she was approached by a local church official. The church had been supporting poor families in the neighborhood, among them a young widow with two small children. Some days earlier, the woman had died, most likely of HIV/AIDS, and the church could not house the children. Would Haregewoin care for them? Cautiously, she agreed.

In that way, Haregewoin began to learn about an epic, heart-wrenching disaster. More than a million children have been orphaned by AIDS in Ethiopia alone. And recent reports estimate that in sub-Saharan Africa, nearly 13 million children, from newborns to teenagers, have been left without parents because of the disease. Children the age of middle schoolers are finding themselves the heads of families, responsible for younger brothers and sisters. The few orphanages that exist in Addis Ababa are overflowing with children.

Haregewoin loved her two young charges, and they blossomed under her care. Word quickly spread about the woman who was willing to give orphaned children a safe haven, and her household began to grow. Some children were brought to her by the police; others were dropped off by their relatives or by people who had found an abandoned child in their yard. One young woman who came to her door hobbled Haregewoin a newborn, staggered a few feet, and then died on the dirt road.

One day, with deep regret, she realized she could not welcome every child brought to her. It was then that Haregewoin had the idea to start a school; if she could shelter and feed the children during the day, maybe their extended families would be able to keep them at home longer. The immediate success of the school inspired another idea: to open a workshop where AIDS-afflicted men and women could work as many days or hours a week as their health permitted. Haregewoin named her orphanage, school, and artisans' workshop the Atelegeb Worku Memorial Orphans Support Association, in memory of her beloved daughter. Today, 28 orphans live with her, 75 attend her school, and 80 men and women are employed in her workshop.

While these numbers seem small in the face of such a virulent epidemic, Haregewoin's devotion to the children is heroic—and points to the humanity disguised by the grim statistics.
Col. Rhonda Cornum
Help—and hope—for wounded soldiers

February 1991, the Iraqi desert:
Flight Surgeon Rhonda Cornum, 36, is shot down and taken prisoner by Iraqi soldiers in the first Gulf War. Both of her arms are badly broken, and a bullet pierces her right shoulder. During her first night in captivity, she is forced to kneel while soldiers put a gun to the back of her head. “I was thinking, ‘Well, at least it won’t hurt,”’ the down-to-earth soldier says now. Later that night, she is sexually molested by a guard. But the Iraqis don’t shoot, and after eight days as a prisoner, she is freed. Her injuries earn her the Purple Heart.

Summer 2004, Germany: A young soldier on crutches hobbles over to meet Rhonda Cornum—now Colonel Cornum—at the Landstuhl Regional Medical Center. “Ma’am,” he says, “I just want to shake your hand.” “You want to hug them all,” she says later.

At 50, she is making news again—this time as the first woman commander of the U.S. military’s largest overseas hospital. Colonel Cornum’s 1992 autobiography, She Went to War, is available in the PX, which is how many patients know her story. “Don’t be discouraged,” she tells the wounded soldiers. “It’s going to take you a long time, but you’re going to come back if you want to.”

Her pep talk isn’t just words. Thinking back to her own injuries, she says she vividly remembers “that feeling of, What’s going to happen to me? Am I going to get better?”

At this facility, in the hills of southwestern Germany, Colonel Cornum supervises 1,853 hospital staff who treat American military personnel stationed in the region and their families. But Landstuhl is also the first stop for soldiers wounded downrange—military speak for the battlefields in Iraq and Afghanistan. Planes arrive almost daily carrying injured troops, most of them victims of IEDs—improvised explosive devices, or homemade bombs. Many of the soldiers are maimed or have lost their extremities; others suffer burns and bullet or grenade wounds.

Some people might find the work grim, but Dr. Cornum—a urological surgeon as well as an Army professional—doesn’t see it that way. “My real mission here in terms of patient care is to make sure that everybody has as little disability as possible,” she says, speaking by phone from Germany, her voice spirited.

Though she’s known as forthright and efficient, Cornum is also seen by colleagues as a leader with heart. “When you first meet her, you might say, ‘Wow, she’s kind of a tough bird,’” says Col. Steven Older, M.D., chief medical officer at Landstuhl. “But under that is a soft, compassionate person. She’s a very caring physician.”

Recently, Rhonda Cornum spent time with the parents of a
23-year-old soldier who had lost an arm. While he was in the operating room, she sat with his folks in a coffee bar in the hospital. “We were chatting about all the great prostheses, and his mom was grateful that he was alive,” Colonel Cornum says. “But she was just sad.” The woman kept apologizing for her tears. “Ma’am, it’s OK to cry,” the hospital commander told her, tearing up herself. Later, recounting this story, she adds softly, “They’re all somebody’s kids.”

It’s her job to run the hospital—and Rhonda Cornum is particularly pleased with policies she has instituted to reduce stress on her burdened staff. But she’s also hands-on: Once a week, the colonel can be found in the operating room. And when the wounded stream in after a spasm of fighting, she pitches in, doing whatever needs to be done. Last April, during the fierce battles in Fallujah, she admitted patients, did physicals, tended to a thousand administrative details, and scrubbed in to assist in the OR, all the while encouraging her medical staff and checking to see how their patients were faring. “She can go night and day forever,” says Colonel Older.

Rhonda Cornum’s dedication to the military began when she was 23. After graduating from Cornell University with a Ph.D. in nutrition and biochemistry, she soon joined the research staff at an Army laboratory in San Francisco. Although married and a mother—daughter Regan had been born three years earlier—she nonetheless took off for her medical degree. By then, her marriage had ended; at medical school, she met her second husband, Col. Kory Cornum, now commander of Air Force personnel at Landstuhl. During the 1980s, she practiced medicine, continued to do research, and took on increasingly important administrative posts within the Army.

In 1990, when Dr. Cornum was asked to serve as a flight surgeon during the Gulf War, she agreed instantly. But her family was never far from her thoughts, especially when she was captured. During those long days and nights, she cheered herself by beaming loving thoughts to Regan, waiting back home in North Dakota with her dad, and to husband Kory, then stationed in Saudi Arabia.

Colonel Cornum’s stint at Landstuhl will end next July. What’s next? Before shipping out to Germany, she spent ten months at the National War College in Washington, D.C., in a prestigious, invitation-only program that’s considered a stepping stone to higher posts within the military. It’s possible—though no one can say—that she’ll be appointed a general. If so, she’d be joining an elite group: Today there are only 14 women generals in the U.S. Army.

Rhonda Cornum says she has “no idea” whether she’ll be chosen. For now, her focus is only on Landstuhl and the wounded she feels honored to help. “I have the best job in the Army,” she insists. —Jennifer Allen