



2018

ANNUAL REPORT



Adventist Health
INTERNATIONAL



PRESIDENT'S REPORT

2018 has been a banner year for AHI in many important aspects. Not only has our donor base expanded exponentially with several large gifts, but our governance system continues to mature as more countries are added. We have had some challenges as we seek to help our institutions develop solid accounting systems, including moving into electronic health records. Transitioning from handwritten records to computer-generated reports and analyses requires precise numbers and disciplined accounting methods. This is a journey we are still on.

Our strategy to develop several large teaching hospitals into Global Campuses of Loma Linda University Health is moving along well, with Malamulo Hospital in Malawi leading the way. Now we are working on Haiti Adventist Hospital in Port-au-Prince as our second Global Campus, followed by Scheer Memorial Hospital in Nepal as the third. Developing each of these sites into a Global Campus requires improved housing, transportation, security, advanced clinical expertise, educational supervision and research opportunities. Our goal is to start with three Global Campuses, one in Africa, the Americas and Asia — in order to provide these areas of the world advanced educational and clinical expertise.

Keeping hospitals functioning at a high level requires expertise in a number of areas. We now have individuals and teams that travel the world fixing laboratory equipment, imaging units, accounting systems, electronic health records, construction issues, plumbing and electrical challenges, and even troublesome audits. AHI is deeply grateful for each of these individuals who donate their time to help our hospitals continue to provide quality care on the front lines of the world's healthcare needs.

What began as a plea from abroad and a dream at Loma Linda University more than 20 years ago is now enhancing healthcare in over 40 hospitals in some of the most difficult areas of the world. But the challenges and needs continue to grow even faster. We have a number of additional hospitals asking for assistance from AHI, including requests to enter new countries. Your support and the continued willingness among our committed professionals from many countries is what keeps this dream alive and helps us answer those begging for help. Thank you for what each of you as donors and volunteers do in bringing healing, health, and hope to the world.

Cordially,

Richard H. Hart, MD, DrPH, president, **ADVENTIST HEALTH INTERNATIONAL**

WHAT IS AHI

WE are a multinational, nonprofit corporation with headquarters in Loma Linda, California.

WE provide coordination, consultation, management, and technical assistance to hospitals and healthcare services operated by the Seventh-day Adventist Church, primarily in developing countries.

WE believe that every healthcare institution must be firmly rooted in its community with concern for all aspects of development and will pursue policies and programs that accomplish this aim.

WE are committed to the education of local healthcare professionals and encourage the establishment and/or retention of professional training programs whenever appropriate.

CONTENTS

- 2** president's report
- 4** global healthcare conference
- 10** bibles for patients
- 12** central america update
- 15** blantyre dental clinic
- 16** a new life for the women of Chad
- 18** philanthropy report
- 21** financial report
- 22** supporting partners
- 26** management team



Adventist Health
INTERNATIONAL



— 2018 —
**GLOBAL
HEALTHCARE
CONFERENCE**



LOMA LINDA UNIVERSITY
HEALTH



Adventist Health
INTERNATIONAL

CAMEL
Consortium of Adventist Medical Education Leaders



Embrace change. Building today's leaders.

Global Healthcare Conference shares leadership and governance education to international healthcare leaders BY LARRY BECKER

The participating global institutions provide employment, train health professionals and give visibility to Christianity in many places around the world.

- DR. RICHARD HART

More than 300 Seventh-day Adventist healthcare leaders from 44 countries attended the eighth Global Healthcare Conference, one of Loma Linda University Health's ongoing international initiatives that support the development of the church's healthcare institutions in developing countries around the world.

Held October 18 to 21 in Loma Linda, this year's theme focused on leadership, governance and management issues faced by healthcare organizations around the world. Conference attendees participated in a variety of interactive plenary sessions and breakout workshops intended

to increase their knowledge of the various roles and accountabilities for which healthcare institutional leaders are responsible. The weekend also provided a venue for networking and collaboration between institutional leaders and encouraged conversations focusing on practical challenges and solutions they face.

"How do these organizations become more effective and purposeful in sharing the gospel of Christ with this world?" Richard H. Hart, MD, DrPH, Loma Linda University Health president, said in his opening keynote address. "Too often we get caught in the struggle for survival rather than with becoming what God intends for these hospitals and clinics to become. Our goal is to help all of these institutions grow and become stronger."

Conference workshops highlighted many of Loma Linda University Health's top leadership team sharing information from their areas of expertise. The weekend also featured several presentations on hospital governance by Lowell Cooper, MDiv, MPH, who served for 15 years as chair of Loma Linda University Health's Board of Trustees until his retirement from the post in 2016.

The Seventh-day Adventist Church operates 175 hospitals and 450 clinics worldwide.

"I'm often asked why Loma Linda University Health struggles to help support these international institutions," Hart said. "One answer is found through the many mothers, children and families whose lives are saved and made better every day at these hospitals.

"There is also a significant impact on the Loma Linda University Health community" Hart added.



Lowell Cooper, MDiv, MPH

RIGHT

Photos from interactive plenary sessions and breakout workshops about healthcare leadership and governance.

“If we didn’t take advantage of these opportunities to live out our dreams of compassion and caring for others, we would be the less for it. These service opportunities shape the culture of Loma Linda, making it a better place.”

The first Global Healthcare Conference took place in 2010 in Honduras and focused primarily on the specific needs of healthcare leaders in Latin America. The conference has been held annually since 2012. During even-numbered years, the conference takes place in Loma Linda. Regional conferences take place during odd-numbered years, with previous events taking place in the Dominican Republic, Côte d’Ivoire and Zambia. The 2016 conference focused on human resources issues and the challenges of staffing international institutions that face limited financial and social resources. Specific topics included compensation philosophy, budgeting and position control; the cost of employee turnover; and the need for effective employee relations. Hospital leaders from India and Belize reported significant advances have taken place in their institution’s human resources efforts thanks to information learned two years earlier.

Collaborating organizations for this year’s conference include Adventist Health International, the Consortium of Adventist Medical Education Leaders, the Health Ministries and Education departments at the General Conference of Seventh-day Adventists, and the Loma Linda University Health Global Health Institute.



Adventist Health International sponsored the purchase of Bibles in patient's native-language of Chichewa. Below are expressions of thankfulness from the Bible recipients...

THANK YOU



I am convinced that God brought me to Malamulo Hospital where I have personally met Him. I have lived my life as a smoker and a drunkard. Having met Jesus and having received His Word, the Bible, will help me to encounter Him daily. Not only me, but also my whole family, and my neighbors. Through this gift, I promise never again to go back to my old habits and past life that was lived in opposition to my Creator. May God bless the donor.

- REDMAN NJOKEYALA



Of all the gifts that I have received in my life, the gift of a Bible is the most precious. I am willing to lose all my possessions, save the Bible. It is my life and my all. Now I am the happiest woman because of the word of life. I owe a lot to the donor. They gave Bibles, yes, but let them know that they have given life to the recipient. I will never thank enough. My prayer is that the Almighty God bless them abundantly.

- DOROTHY BATUMEYO



I was not a believer when I came into the hospital. Having been in the hospital, I have encountered Christ and accepted Him as my Lord and Savior. This Bible which I have received as a patient will strengthen my faith and will assist me to encounter Christ daily and that will enable me to share Him to others as I tell my story. I am thankful to God and also to those who donated the Bible to me.

- DUNCAN MASIYE



BIBLES *for* PATIENTS

MALAMULO ADVENTIST HOSPITAL, MALAWI, AFRICA



Photo courtesy of West Venezuela Union



NICARAGUA

The **Nicaragua Adventist Hospital**, in the country's northern sector of Esteli, is blessed by the strong leadership of Socorro Ubada, MD, an anesthesiologist dedicated to the Church's healthcare mission. In the past two years, she's led in the building of a new, 4-story, 10,000 square foot, 10-bed hospital. The hospital has up-to-date surgical, OB/GYN and general medicine facilities. This has allowed her to offer modern services in a national socialized medicine setting and deliver whole-person care to the 3,000-5,000 patients that go to the hospital annually.

While quieted down a bit, compared to some two years earlier, the political and economic situations in Nicaragua are still precarious, potentially making aspects of healthcare delivery by the private sector somewhat unpredictable. Still, Dr. Ubada and her staff walk the best diplomatic lines they can to continue providing spiritually-centered care in a clean, modern, well-equipped hospital setting in the small city of Esteli. We believe that the national government recognizes leadership's efforts in providing the quality of care they do; it again recently licensed the hospital's operations. AHI's work there centers on building service capacity, providing supplies and equipment, and collaborative governance with the Church's leadership.

VENEZUELA

The political and economic situation in Venezuela is precarious and has made headlines in international news. It is difficult to know what may happen there politically. The bottom line is that the Church's healthcare work has been profoundly affected by the country's political and economic instability. The AHI hospital's capacity to deliver care in Venezuela's north-central region at Barquisimeto, is seriously impacted. There are virtually no medications, a shortage of medical supplies and equipment replacement parts, with surgical capacities and potential severely short-circuited. At times, the staff there have even had to wash and reuse IV tubing to the best of their ability, since the national government is controlling the importation of supplies and products. In addition, citizens are enduring food and supply shortages.

Yet, driven by a strong commitment to Church and community, our staff there keep delivering care in the best way they can. All this while the hospital strives to build new facilities. The **Hospital Adventista de Venezuela**, and the country in general, need our prayers.

HONDURAS

In the past year, **Hospital Valle de Angeles (HAVA)**, located in a beautiful setting at 5,000 feet elevation, has partially transitioned into becoming a long-term care facility, in addition to delivering general medicine services. Along with new and energetic administrative leadership, this new array of services has greatly strengthened the hospital's financial position. HAVA is engaging in a capital campaign to add a new wing with 12 in-patient rooms to its facilities. Located in a rural setting, HAVA has, in the past, faced financial challenges.

Although these have not yet totally abated, the Hospital's new service orientation portends well for its future operations, and thereby, for enhancing the Church healthcare presence and reputation in this Central American country.

many fathers

BLANTYRE DENTAL CLINIC RENOVATION
Malawi, Africa



by DOYLE NICK, DDS



BELOW

CEO of Blantyre Adventist Hospital, Kirby Kasinja, delivers a speech during the opening ceremony last September.



BLANTYRE DENTAL CLINIC RENOVATION

It is said that, "Success has many fathers but failure is an orphan." I was reminded of this saying recently when a friend casually said . . .

...But first let me tell you that recently the dental clinic at Blantyre Adventist Hospital (BAH) in Malawi has recently been rejuvenated in a facility that was remodeled from an empty office building.

What was an aging, poorly maintained dental clinic with obsolete equipment, shabby interior and crumbling cabinets, is now a shiny, new, world-class facility with modern equipment and a spacious, functioning, professional appearance and floor plan.

So my friend said, there are a lot of people claiming credit for the new dental clinic in Blantyre. To which I quoted the saying about fathers and orphans. As I considered this, however, I realized that this is not so much a cynical statement about people self-promotion but an absolute truth.

Success does have many fathers. The project of rebuilding the Blantyre practice is a case in point. The president of the hospital, Kirby Kasinja, was the first one that I remember envisioning the office building as a dental clinic. From that point on, many "fathers" worked together.

The dental office of the General Conference Department of Health Ministries worked with Adventist Health International (AHI) to request a \$25,000 grant from a great organization called Versacare. This request was granted and became the seed that grew into the fund for the project, which

was made up of a loan from AHI to BAH, capital designated by the BAH Board as well as grants from the General Conference Department of Health Ministries and the National Association of Seventh-day Adventist Dentists (NASDAD).

An initial inspection of the office building was done by Ken Breyer, MS from the construction department of Loma Linda University while he was in Africa on other matters. Planning came next and included floor plans (drawn by Stephanie Dennis – LLU Construction), materials lists, projected labor and materials costs, and many other details which were hashed out in many remote video conferences with the building team of BAH, Honest Chirwa, Kirby Kasinja, and the dentists, Darrell Pikar, and Dr. Sheena Soja. Danjuma Daniel, DrPH, MBA; Ken Breyer, MS; and David Moore, rounded out the Loma Linda construction team and together a picture of the effort needed came clear.

A building supervisor was sought from the small Adventist world of dentists/contractors and a willing volunteer, Dr. Tim Wall, agreed to serve in that capacity. Sadly, Dr. Wall passed away from Lou Gehrig's Disease. We are extremely thankful to Dr. Wall for his dedication, but heartbroken at his passing. Jeff Bartley, DDS, a capable and experienced dentist and contractor agreed to continue Dr. Wall's work.

Dr. Bartley and his family traveled to Malawi and lived there for more than two months while construction took place. He is a true servant leader, communicating across cultural and language barriers, illustrating optimum building practices, working beside the laborers for long sweaty days, wiring, plumbing, painting, installing dental equipment and even flying to the neighboring country of South Africa to buy equipment and materials that were necessary for a modern practice.

During this time, he appreciated the skills and techniques of the country and learned the perspective of those with whom he worked. He was able to enlist the people of Malawi in the project, winning over doubters, and together they made the clinic a reality.

There are many individuals who we are not mentioning in this short narrative but from hourly laborers to administrators, from institutional board members to many donors — all had a hand in this very worthy project.

Today, the clinic stands not only as a symbol of success, but of God's love of His needy and hurting children, — a monument to collaboration and working together — and a clear illustration that success does indeed have many fathers!



ABOVE

Blantyre Adventist Hospital and Dental Clinic staff tour the newly constructed treatment rooms.





Bere CHAD

GIVING WOMEN

a second chance
AT *life*

ABOVE

28 women, post-surgery, are starting their lives anew with brand new dresses and the gift of a Bible.

BERE ADVENTIST HOSPITAL

Obstetric fistula is a serious problem in the world's poorest countries, where too many mothers give birth without any medical assistance.

Obstructed labor is a common complication of pregnancy and may result in damage to the mother's pelvic tissues. In obstetric fistula cases, where proper medical supervision during delivery is unavailable, the baby often dies and the mother's life is put at risk. If the woman is lucky enough to survive, she may develop a fistula into the bladder or colon. Uncontrollably leaking bodily wastes, these women are too often shunned by the community, their families and even their husbands.

Danae Netteberg, MD, specializes in obstetrics and gynecology and performs surgeries to repair vesico-vaginal fistulas (VVF) at Bere Adventist Hospital in Chad, Africa.

She recounts a few of her cases in an excerpt from her blog "*Life Under the Mango Trees*":

In first world countries, VVF is very rare, and is most often caused by surgery or cancer. But I am here in the third world. I have been operating to correct VVFs for seven years now, but usually only do about 10-20 per year. I had some harder cases that were not healing due to their urethral involvement. I was able to find the fistula expert in the country and invite him to our hospital. Normally he works out in Abeche, a two-three day drive from here.

Hoping I would get at least 10 cases to do together, I made a few announcements on the radio. I had already had six patients waiting, so I needed just four more.

To my surprise, there are more VVFs here than I thought! We ended up doing 28 cases in one week, many of them quite complex! It was a busy week. All of the other non-urgent cases had to wait until the following week since we only have one operating room to work in.

Each story is touching. There are several older women who have been leaking urine for over 20 years! They had never been operated on. They didn't know that someone could fix them! One lady came in with a pretty simple fistula. But get this. Her daughter now has the same problem. Both of them operated on in the same day! A mother-daughter special. Both healing well.

Another lady gives a heart wrenching story of having a rope in her hand ready to hang herself. She just couldn't do it, but she was strongly considering it several years ago. Now she is on her way to recovery.

These women live tough lives. They leak urine. Therefore, they smell like urine. They sleep in wet, smelly clothes. Everywhere they sit is wet when they get up. They can't get a normal job because they smell. Most of their husbands leave them. Usually they cannot have more kids. Their life is a mess.

Now they have a second chance. A second chance at life. A second chance to be clean. After their surgeries, these women went home in a clean, new dress and a Bible

▶ CHAD

AVERAGE BIRTHS PER WOMAN:

▶ 4.45

BIRTHS ATTENDED BY MEDICAL PROFESSIONALS:

▶ 25.3%

MATERNAL DEATH RATE:

▶ 1 in 18

PHYSICIANS PER 10,000:

▶ 0.4

FEMALE LIFE EXPECTANCY:

▶ 51.5 years

POPULATION LIVING IN RURAL AREAS:

▶ 79.5%

according to the world health organization



The Netteberg family serving in Chad

Philanthropy, a voice for equity

So much of the current discussion in philanthropy is about equity and justice. While relatively quiet politically in much of the past, many of the leading philanthropic foundations in the United States are now concerned, and increasingly vocal, about this topic. While we may argue a bit about the root causes for this seeming “political” awakening, the fact is that it is happening among some of the salient philanthropic thinkers.

Donors to AHI, while not necessarily being ideologically vocal on this issue, have always been contemporary in their thinking about equity and justice as related to the global delivery of healthcare. Their dollars have followed their belief tangibly, to ensure that the Church’s hospitals overseas do provide the best in whole-person care to the populations they are committed to serve. Perhaps most notably in this regard is that AHI donors have given more than \$24 million in the past two decades to close the often-discussed equity gap in healthcare in the developing world.

In 2018, donors’ helped to further build our overseas hospitals’ capacities to deliver compassionate, competent, and equitable care. You, our donors gave at record levels during the year; more than \$3.2 million! Truly, there are no words.



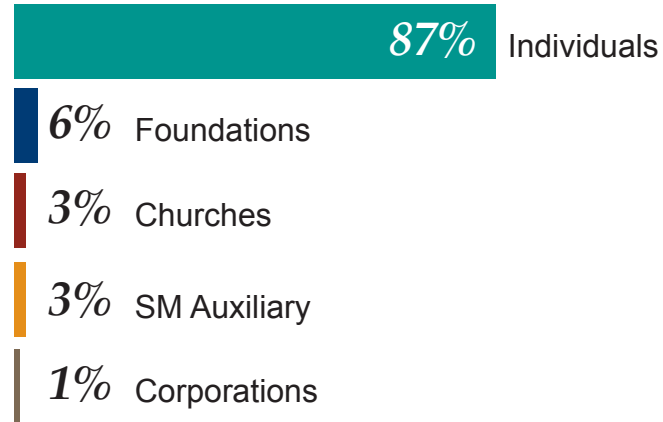
2018 MILESTONES

- ▶ At close to \$1.5 million, much of this annual record was propelled by the gifts of a donor family that has asked to remain anonymous. This family is truly concerned for the individuals and families that need compassionate healthcare the most.
- ▶ Organizations such as Versacare, a philanthropic foundation in Riverside, California, continued its formal partnership with AHI for the delivery of healthcare at Adventist Church hospitals and clinics overseas.
- ▶ The Loma Linda University School of Medicine Auxiliary continues to show its dedication to support those hospitals that host medical alumni in their work.
- ▶ Almost 500 donors made more than 1,100 gifts to AHI during the year.
- ▶ The Adventist church has also been financially supportive of AHI’s work in a significant way.
- ▶ Many other individuals from various religious and social backgrounds understand the needs and support AHI’s work.

Thank you, to each of you, AHI Donors!

PHILANTHROPIC SUMMARY

▶ Percentage of gifts by source



▶ Gift summary

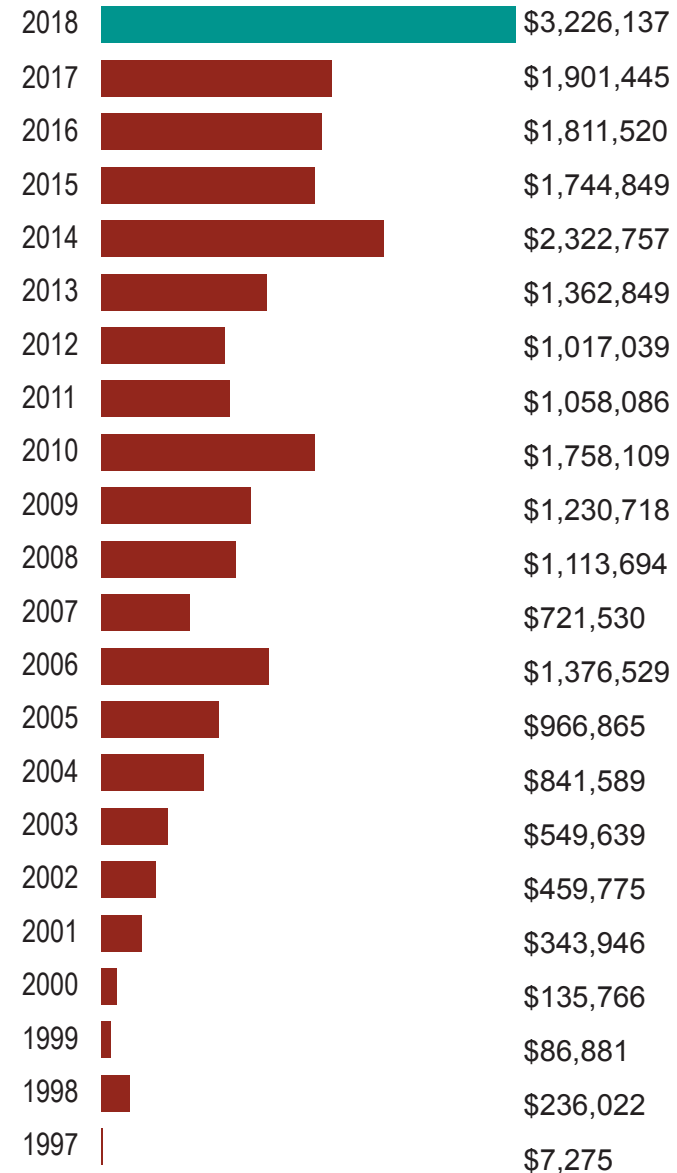
Number of Gifts	1,140
Number of Donors	549
Average Gift	\$2,830
Average/Donor	\$5,876
Largest Gift	\$1,497,271
Smallest Gift	\$10

▶ Support by program area

Angola	\$185,000	Liberia	\$26,333
Botswana	\$9,000	Malawi	\$1,329,867
Cameroon	\$600	Nepal	\$9,035
Chad	\$214,582	Nigeria	\$49,500
Congo	\$31,370	Rwanda	\$4,400
Ethiopia	\$150	Sierra Leone	\$39,926
General	\$672,991	Trinidad	\$7,150
Guyana	\$8,215	Ukraine	\$13,000
Haiti	\$78,610	Zambia	\$509,192
Honduras	\$27,760	Total	\$3,226,137
Kenya	\$9,456		



▶ Philanthropic gifts 1997-2018



STATEMENT OF FINANCIAL POSITION

	12/31/2018 (unaudited)	12/31/2017 (audited)
ASSETS		
Cash and Cash Equivalents	\$4,218,965	\$2,937,868
Other Receivables	113,604	73,763
Other Current Assets	100,000	6,107
Other Assets	84,470	30,000
Total Assets	\$4,517,039	\$3,047,737
LIABILITIES & NET ASSETS		
Accounts Payable	\$166,005	108,287
Other Current Liabilities	6,191	2,000
Total Liabilities	\$172,195	\$110,287
NET ASSETS		
Unrestricted	\$161,564	\$93,252
Unrestricted, Board Designated	247,110	238,106
Temporarily Restricted	3,779,051	2,449,996
Permanently Restricted	157,118	156,095
Total Net Assets	\$4,344,844	\$2,937,450
Total Liabilities & Net Assets	\$4,517,039	\$3,047,737

STATEMENT OF FINANCIAL ACTIVITY

For the fiscal year ending December 31, 2018 & 2017

	2018 Total	2017 Total
SUPPORT & REVENUE		
Contributions	\$3,147,138	\$1,889,065
Interest Income	158,160	116,749
Other Income	77,920	92,885
Total Support & Revenue	\$3,383,217	\$2,098,699
EXPENSES		
International Programs	\$1,477,261	\$1,476,533
General & Administrative	486,468	504,483
Fundraising	12,094	7,334
Total Expenses	\$1,975,823	\$1,988,350
Change in Net Assets	\$1,407,394	\$110,349
Beginning Net Assets	2,937,450	2,827,101
Ending Net Assets	\$4,344,844	\$2,937,450

FINANCIAL SUMMARY



Adventist Health
INTERNATIONAL

Adventist Health International is committed to utilizing philanthropic gifts in the manner donors desire.

Occasionally, conditions in the field may alter program goals or activities. If this occurs, AHI will redirect funds to similar projects.

SUPPORTING PARTNERS

our work is made possible only through the generous support of individuals, organizations, churches and corporations. We deeply appreciate you and thank you for your continued support.

CHURCH PARTNERS

Asheville North SDA Church
Beltsville SDA Church
Columbia Union Conference
Countryside United Methodist Women
Fairmont SDA Church
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SDA Church of the Valley
Three Angels Broadcasting Network
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