



Adventist Health
INTERNATIONAL
annual report

2014



president's report

As we embark on new strategies for 2015, we also look back at the incredible year of 2014. The Ebola crisis in west Africa defined the last half of the year. Two AHI hospitals - Cooper Adventist Hospital in Monrovia, Liberia, and Waterloo Hospital in Freetown, Sierra Leone, were in the eye of the storm. Both of these facilities felt the full impact of the epidemic, losing several staff members to the infection while bravely caring for many. Despite the challenges and ever-present threat of danger, our staff devised ways to remain open while other hospitals closed, providing care for many medical emergencies other than Ebola. Today, Lucinda Carter, our administrator, and Gillian Seton, our young surgeon at Cooper Hospital, carry on with assistance by visiting doctors provided through AHI. Waterloo Hospital in Freetown has been commandeered by the government to use as an Ebola Triage Center until the epidemic is over. Thank you to all who donated to this special need, which has enabled AHI to provide critical supplies and keep the operations going during a time when the economies were shut down and no one could pay bills.

Another story that has matured through 2014 is our strategy to develop a new model of health care in Africa. Most of our young national doctors prefer to remain in the cities, while our hospitals are in the rural areas. The result is that they find work with other organizations, while we need to recruit doctors from abroad to staff the hospitals. To compensate for this reality, we are developing a multispecialty practice in Lusaka, Zambia, as a new model for providing Adventist health care in a country. Christy Elliott, a physical therapy graduate from Loma Linda, left nearly \$450,000 in his will for a special mission project. With support from Loma Linda University, these funds have been committed to developing this new Lusaka Adventist Medical Center in the Chalala suburb of Lusaka.

In addition to these major projects, AHI continues to relate to our growing number of hospitals throughout the world. Dale Mole has arrived at Scheer Memorial Hospital in Nepal, giving us an anchor to start working with that institution. Major developments are underway in Haiti with remodels of the operating theaters and clinical laboratory underway. Progress has continued on the new patient tower in Trinidad, and a new five-chair dental clinical was opened in Guyana. Our residency programs continue to grow at Malamulo, and both Bere and Moundou are thriving in Tchad.

As you will see in this Annual Report, our giving this year hit a new high, over \$2.3 million. This enables so much to happen around the world. With this encouragement, AHI has activated in Zimbabwe, Nepal, and Nicaragua, as well as continuing to plan in several other countries. AHI is a completely donor-driven organization, one in which we receive your donations, then seek to leverage them to the maximum throughout our system or in whatever project you have selected. Hundreds of employees and volunteers are engaged, and literally thousands of patients are alive and healthy today because of what you make possible. On behalf of each of them, we are deeply indebted to your interest and support of AHI.

Sincerely yours,

Richard H. Hart, MD, DrPH, President
Adventist Health International



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 health care services operated by the Seventh-day Adventist Church, primarily in developing countries.



we believe that every health care 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 health care professionals and encourage the establishment and/or retention of professional training programs whenever appropriate.

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monrovia, liberia

how long would you stay?

What would you do if you were asked to risk your life every day? Would you find contentment in this situation? Would you find satisfaction? This is the situation that Ebola fighters are placed in each day on the job.

Before 2014 Ebola was nothing more than a distant concept. Now it is a common fear throughout the world. In March of 2014, the Ebola virus spread throughout western Africa at astonishing speed. To date there have been nearly 22,000 people infected with this disease and an ever-growing number of deaths currently recorded at more than 10,000.

Loma Linda University School of Medicine graduates Gillian Seton, '08, James Appel, '00, Gregory Shank, '99, and Greg Saunders are Ebola fighters. They are real life superheros who fight evil everyday. In addition to the fact that these physicians are working to stop the spread of this disease and make the world a better place, each of these physicians has several things in common. They all work with Adventist Health International, but in addition to that they have all served in Monrovia, Liberia at Seventh-day Adventist Cooper Hospital.

Drs. Appel, Saunders and Shank have all taken their turns working in Liberia for short periods of time but unlike them, Dr. Seton is working as a Deferred Mission Appointee from Loma Linda University Health through Adventist Health International and has been stationed at this site since March 2014, right before the Ebola outbreak.

Despite being thrust into a physician's worst-case scenario, Seton chooses to stay and continue to help those in need because she believes she can make a difference.

“Helping people has been a driving force and motivation for me for nearly my entire life. Medicine is the perfect outlet for this. I don't have the patience to work with social injustice, political oppression, or any other forms of injustice,” Seton said, when asked why she chose a medical profession. “Medicine however suits my temperament and even my weaknesses in order to help those I can. I cannot think of a more fulfilling job or goal in life than to relieve someone's suffering and to prove that someone cares enough to go the extra mile.”





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While this disease is still of utmost concern, the number of new Ebola cases in Liberia is slowing down. Seventh-day Adventist Cooper Hospital is continuing to operate as an Ebola free zone where patients in need of medical treatment can come, be treated and not have to fear exposure to this deadly disease.

It is because of people like Seton, Appel, Shank and Saunders, who take their mission to the next level, that Cooper is able to maintain operation.

To donate funds toward this cause please visit ahiglobal.org and learn how you can help Cooper and many other hospitals beat the spread of deadly diseases.



shoes for haiti

Here in the U.S. shoes are something we take for granted. Being barefoot is one of the simplicities of life. We run through a field of grass or relish the feeling of sinking our toes into the sand while standing next to the ocean, but at the end of this moment, we can usually find a pair of shoes to place our overly tender feet into.

This feeling of footloose and fancy-free is not the case in many countries. One example of this is the Republic of Haiti. In certain areas of Haiti there are construction workers who rarely have shoes to wear and they can be found doing manual labor either barefoot or in torn flip-flops. At the Adventist Health International site, Hopital Adventiste d'Haiti, one man took notice of this situation and decided to help.

Dan Brown is currently working in Haiti as the construction coordinator. Dan shares his time between his home in Maine and the job site in Haiti.

One day as he was working with the Haitian crew on site, he realized that many of the men wore either flip-flops or sneakers that had long since lost their toes or soles. This might not seem too serious, but when you consider the type of work that these men are doing, it is a legitimate danger to their personal wellbeing. These workers focus on maintenance and ground jobs, which expose them to many dangerous and harsh environments to be working in practically barefoot.



chalala project

"As I struggled with what I was seeing, I came to the conclusion that I was going to buy them all new shoes," Dan said. "I asked my interpreter if I would offend the work crew if I brought the issue up with them and he told me that the offer of new shoes would be well received."

The interpreter could not have been more accurate. Dan began by asking the men whether they would rather be wearing sneakers or sturdy 6-inch work boots and when they all answered the boots, he informed them that he was going to buy them each a new pair.

"The overwhelming response I received from all the crew brought tears to my eyes," Dan said. "It still does!"

There was only one problem. Dan did not know how he was going to be able to buy these promised shoes for his men. The long trip home gave him adequate time to come up with a plan. He would ask his home church, Woodstock Seventh-day Adventist Church in Woodstock, Maine, for help.

"Sabbath morning I asked for a little time to make a small mission appeal, the topic 'Shoes for Haiti,'" Dan said. "I made the same appeal the next Sabbath and two weeks later nearly \$700 had been received and the shoes are now purchased."

This contribution from a small hometown church makes a world of difference to the men working at Hopital Adventiste d'Haiti. There are needs in the world and there are people who can make the decision to help satisfy these needs.

With 10 acres of land deeded to the church by the city of Lusaka, AHI Zambia is now working to raise adequate funds to build a new multispecialty clinic. This clinic will encompass the needs of many by providing quality healthcare services over various specialties. By providing medical services, obstetrics, gynecology, orthopedics, cardiology and other specialties, this clinic will make it easier for patients to receive the care they need in a strategically located plot of land.

This project is going to be implemented in a phased approach, with the initial phase beginning by the end of 2015:

Phase 1- Outpatient Clinic: Consisting of multiple construction phases with final completed facility totaling approximately 10,000 square feet.

Phase 2- Inpatient Medical Center: The inpatient medical center is currently designed as a two-story 100,000-square-foot facility. The final scope and size of the medical center will be refined based on community needs.



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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.

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global healthcare conference

Administrators from Seventh-day Adventist hospitals all around the world joined together in Loma Linda, California, on Oct. 16-20, 2014, to learn from each other at the third annual Global Healthcare Conference.

The response from attendees? This conference was by far the best one yet and the reason was because of the opportunity attendees had to fellowship and interact with one another.

Olen Netteburg, a deferred mission appointee (DMA) serving as the medical director at Bere Adventist Hospital in Tchad, said, "I enjoy getting to meet new people and interact and this year there was a lot of that. I especially enjoyed this conference because I was able to bring a few people with me from Tchad who were able to learn about some of the very issues we have been struggling with at our site."

According to Cheryl Lake, missions program coordinator of the event, the topics chosen this year were picked because they were achievable and practical.

"We tried to provide skills that they can implement while they are here and then continue to use once they have returned to their hospital sites," Lake said.

"This conference is so wonderful," Cenaida Panneflekk, CEO of Antillean Adventist Hospital in Curacao, said. "Our hospital is struggling, but I come here and I talk to people and listen and learn that all over the world, they are experiencing the same things or worse. It lets me know that we are all in this together and all we can do is pray and try harder."

The conference went in a different direction from past years in terms of the topics covered. The focus was on providing information that could be implemented in every hospital setting. This "single-track" focus allowed for consistency between what all of the hospitals were learning together.

"We tried to have sessions where they could begin to implement their work, with the things that they were learning because often when a conference is over, you learn a lot but either you don't have time to implement it or you just might not have understood it as well. So this time the focus was to get people to implement it while they are here," Lake said. "I think it has been really positive. I've seen people talking amongst themselves and it is really great to see the interaction of the people."



changing lives

Contributions to AHI*

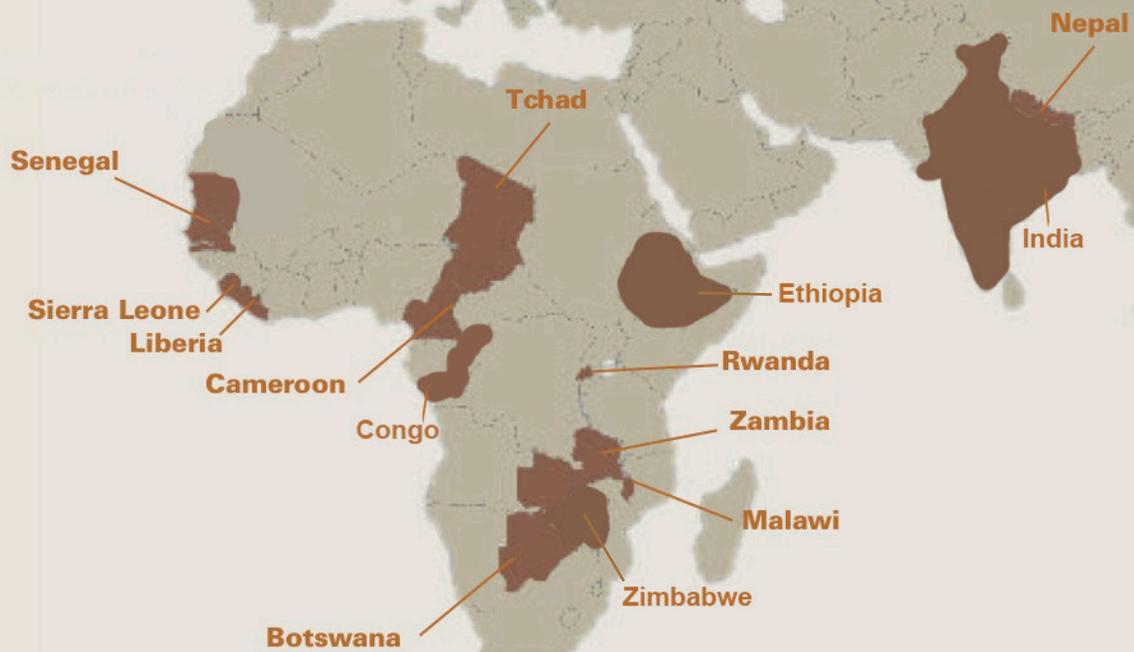
January 1 to December 31, 2014

AHI - Global	\$823,313
Belize	100
Botswana	15,100
Cameroon	17,600
Chad	393,610
Congo	13,460
Ethiopia	961
Guyana	25,500
Haiti	55,382
Honduras	5,100
India	12,500
Liberia	284,374
Malawi	147,083
Nepal	3,000
Rwanda	6,000
Senegal	900
Sierra Leone	28,640
Trinidad	200
Venezuela	500
Zambia	488,434
Zimbabwe	1,000

Total \$2,322,757

**Only includes funds transferred through AHI - Global*







malawi field station

AHI's oldest mission hospital serves as home to numerous LLU graduates



Malamulo Hospital and Blantyre Adventist Hospital compose what is now called the Malawi field station of Loma Linda University Health. The field station hospitals are located in the southern part of Malawi, Africa.

These sites are located in a country where the life expectancy is 47.3 years old, 33 percent of people are malnourished, only 73 percent of people have access to safe drinking water, and for every 40,000 people, there is one physician within the country. These two hospitals continue to grow and flourish for the benefit of their communities.

Malamulo is considered to be one of the oldest mission hospitals and was founded when the Seventh-day Adventist Church purchased land for a mission station in 1902. This location later became known as Malamulo, which translated from the Chichewa word meaning “commandments.”

Blantyre Adventist Hospital was established in 1974 and now serves dental, medical and optical care patients.

Throughout the years, these hospitals have provided missionaries the opportunity to serve others. Even as the hospitals grow, the need for medical personnel is also growing. In 2014, these two locations served as homes for eight Loma Linda University graduates.

Five deferred mission appointees (DMAs), Christy Shank, MD, Ryan Hayton, MD, and Jamie Crouse, MD, served at Malamulo Hospital, while Tiffany Priester, MD, and David Saunders, MD, served at Blantyre Adventist Hospital.

In addition to DMAs there were also three global service awardees (GSA), Danielle Davis, PharmD, and Temidayo Ogunrinu, MPH, serve at Malamulo Hospital while Julie-Anne Satterfield, BSN, served at Blantyre Adventist Hospital.

Each of these individuals made the decision to serve and while each chose their location for various reasons and hospital needs, the common ground is the fact that all feel inspired by the hospitals they serve, the people they work with, and the cultures that they all have come to think of as a second home.

“Mom, I really want to go!!”

a story of philanthropy

By Albin Grohar

“My doctor, one of your graduates from Loma Linda, suggested that I visit your campus...” That was the quick content of an email I got on a Saturday afternoon 18 months ago.

“But I’m really not sure about this. I like to assist hospitals, but don’t you folk only serve members of your church?” Thus began an email pathway between Ms. Melanie Coto, an elegant lady and philanthropist from Southern California, and me.

One of the few advantages in being an old-timer (my grown boys’ notion) with significant institutional history is that we know our employing organizations well. What followed was my electronic response summarizing Loma Linda University’s multi-faceted student and patient diversity.

“Ok, you’ve convinced me... thanks for responding so quickly. I want to come and see,” came a fast answer.

Within a week, Ms. Coto came to Loma Linda. “Are all of you on this campus always this nice?” Those who train in philanthropy thankfully acquire some diplomatic skills. “Yes, we are just as perfect as the rest of the world,” I replied. Ms. Coto smiled.

We talked about many things during Melanie’s visit, research, health professions, mission-minded medical training, but mostly about mission.

A two-hour visit went by quickly, and ended with two overall responses by Melanie:

“I want my Chloe (daughter) to see this place and talk to you folk. And... although my funding year has ended, I want to make a \$100,000 grant for research here. I’ll send you some right away, and then the grant’s last half in January of 2014. Remind me to pay you,” a reminder I took delight in executing at the start of our philanthropic journey with Ms. Coto.

Two days later, we had Chloe, a bright, 4.0 GPA, vivacious, 4-foot-2-inch 19-year-old undergraduate who also volunteers at an LA-based children’s hospital emergency room.

“I want to finish my bachelor’s here, and then train as a doctor at Loma Linda,” Chloe noted with enthusiasm at the visit’s end.

In this way began and ended a two-visit episode; we prayed for Guidance that somehow this “serendipitous” and humanitarian story would continue. If we ask, Guidance responds.

“Albin,” came Melanie’s phone call; “can you all find a place for Chloe to do a month of mission service? She’s done Central America. She wants something different. I’ll need your response right away.”

This request took some thinking. Knowing that Drs. Ryan Hayton and Jamie Crouse from Malamulo Hospital would be at Loma Linda in December of 2013, we took the risk of inviting mother and daughter Coto to a Friday vesper program focused on Malamulo. For many who are unfamiliar with our Church’s habits, vesper services can be strange programming territories.

The two ladies were curious, eager, excited. Before entering the program’s venue, however, I held them in their car for a bit. “I need to explain some things... you’ll hear terms like Union, Division, GC, mission, vespers, Sabbath, and there will be prayer...”

“Yes, that’s ok,” they responded. “We’re ready!”

The meeting was well received by the Coto’s. “Mom, I really want to go,” echoed Chloe excitedly.

“You all are really religious?” asked Melanie.



And so, with much nail-biting fear at sending a pretty, 19-year old girl to the African continent alone, we agreed on Malamulo Hospital as a mission site for her.

Chloe spent close to one month there, sleeping in unusual quarters, adjusting to assignments she was given, shadowing physicians and watching surgeries when allowable. She even met Malawi's then-president, Joyce Banda, who visited Malamulo while campaigning for re-election.

In the meantime, back at Loma Linda and AHI, we held our corporate breaths, hoping all would go well with Chloe.

Melanie called again: "Albin, she's back! When I picked her up at LAX, I expected to find an exhausted, disappointed and discouraged young woman exiting the gate. What I embraced tightly was an excited, bright-eyed smiling daughter. 'Mom, I want to go back someday, and I want to go to school at Loma Linda!'"

"My daughter wants to help Malamulo Hospital financially too," urged Melanie. As Board members of their family foundation, mother and daughter contributed \$76,800 to establish the now-renovated Coto Maternal O.R., and help pay for hundreds of women to get Pap Smears and minor cancer-removing surgeries.

And... Chloe will become a student in Loma Linda's School of Allied Health Professions in the fall of 2015.

Melanie Coto, for her part, understands a bit more of what Loma Linda, and its mother church, are all about. Chloe's life is currently driven by a new sense of mission. And now there is a new trust relationship between LLU, AHI and the Cotos that may portend well for all of us in the future.

Blessed are the strange turns that philanthropic relationships take with the Father's guidance.

an unprecedented philanthropic year!

AHI's donors have made for a spectacular record year in philanthropic gifts in 2014! To all of AHI's contributors, thank you. Each of you enables what AHI does around the world.

Unique and continuing gifts have made a total of \$2.3 million during the year-an increase of close to \$1 million over the previous year:

-AHI donors responded exceptionally to the Ebola crisis by supporting the AHI hospitals in Liberia and Sierra Leone. These hospitals, and their physicians, especially Gillian Seton, as well as their health care staff were in the epicenter of the crisis. Contributors' financial support was critical for the staff on the ground who exhibited boundless courage and commitment. Philanthropic gifts to combat the crisis totaled \$515,000.

-The Loma Linda University Medical Auxiliary continued its unswerving support for overseas hospitals where Loma Linda medical graduates work. In 2014, the contributions totaled \$120,000.

-Versacare, a Southern California based foundation, granted \$190,000 to support renovation projects in South America and Africa, and contributed to assist with the Ebola crisis. Furthermore, Versacare now considers AHI a formal partner in implementing mission-oriented health care programs overseas. This partnership provides some future funding that allows AHI to direct Versacare grants toward urgent areas in need.

-The Coto Foundation, profiled in the special philanthropic feature listed above, made grants amounting to \$76,800 to AHI for Malamulo Hospital in Malawi.

-An unusual testamentary gift of \$449,110 came to AHI to help develop new health care programing in Chalala, Zambia.

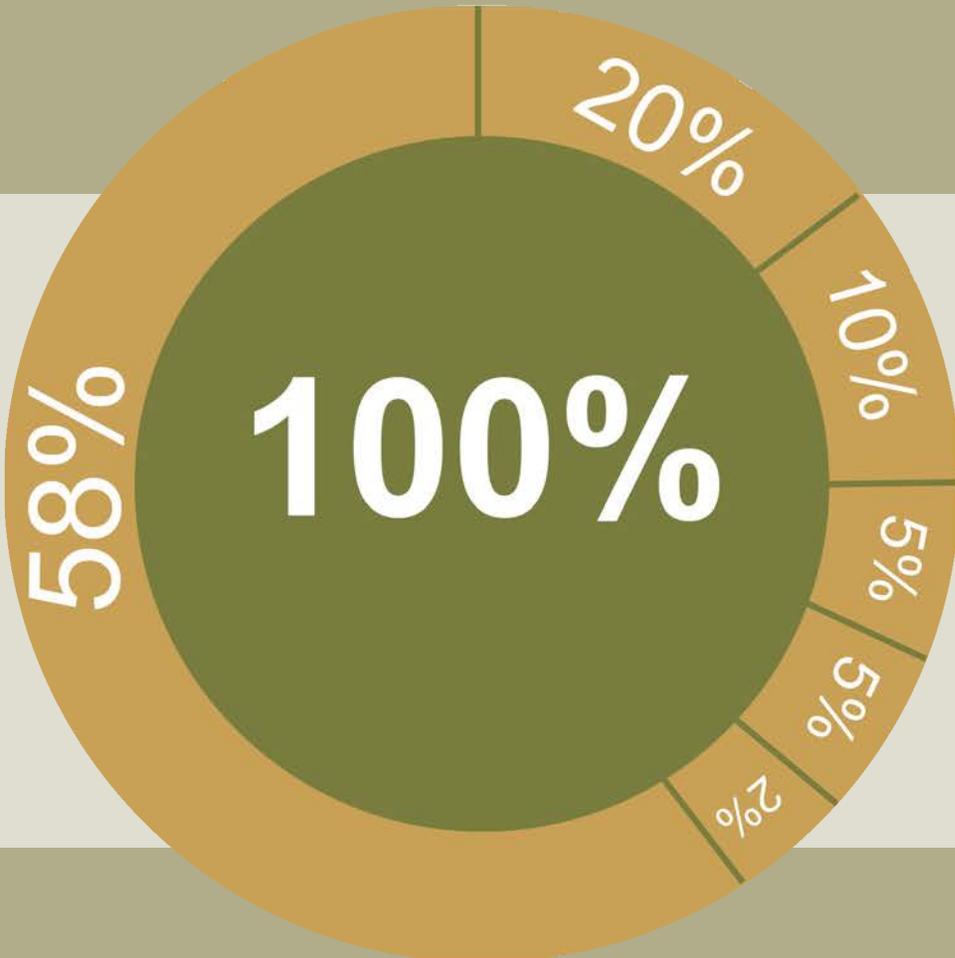
-The Loma Linda Korean SDA Church also wanted to assist with the Ebola crisis. It sponsored a musical program that raised \$57,000 in gifts.

-The Loma Linda University medical class of 2016 wanted to assist Seventh-day Adventist Cooper Hospital in Monrovia, Liberia. With this goal, class members fundraised aggressively and generated gifts amounting to more than \$50,000.

-The International Foundation granted \$15,000 to help renovate the clinical lab at the Hopital Adventiste d'Haiti.

Close to 1,000 donors made almost 1,300 gifts of all sizes to the organization to stimulate its capacity-building work for overseas hospitals and clinics. The philanthropic story that AHI's contributors have written cannot be overstated; across an 18-year history, gifts to the organization now total almost \$16 million.

The stories of philanthropy for AHI have different emotional and reasoned roots. But all have the common thread of mission and service activism for AHI and the Seventh-day Adventist Church's work. Again, to each contributor, thank you.



Individuals	58%
Foundations	20%
Churches	10%
AHS	5%
SM Auxiliary	5%
Corporations	2%

country reports

inter-american division

Incorporating the Caribbean and Central American countries, the Inter-American division of Seventh-day Adventists now includes 14 hospitals. AHI has been adding additional countries when possible, and now covers 8 of these institutions. Requests have come in to AHI to initiate involvement in Dominican Republic, Mexico, Guatemala, El Salvador, Nicaragua and others, which are being added as time and resources become available.

haiti

Without question one of AHI's greatest challenges this year has been Hopital Adventiste d'Haiti. Located on the western edge of Port au Prince, just a few miles from the epicenter of the massive earthquake five years ago, the hospital survived intact, but has faced many other struggles since then. The loss of a major contract with the US consulate has put considerable financial pressure on the institution and forced major layoffs. We have taken this opportunity to undergo a major remodeling of the operating theatres and clinical laboratory. With these improvements we expect to eventually regain the US contract as well as improve our quality of care. Edward Martin, who has served AHI well in Zambia and Malawi, is now our CEO at HAH, working alongside Frank Geneus as medical director. Perhaps the most exciting plan is that in late 2015 several members of the LLU School of Medicine class of 2010, who took on this hospital as their class project while in school, will be finishing their specialty training and going to work in Haiti. Alex Coutsoumpos has accepted a position as surgeon at HAH, Joseph Kim in emergency medicine, and his wife, Melissa, in pediatrics. With these upgrades and additions it is expected that HAH will restabilize and continue its preeminence as both an orthopedic center and major referral hospital.

guyana

Davis Memorial Hospital was the first hospital to join AHI back in 1997. Currently led by Beverly Chan as administrator and Melchor Fabriga as medical director, the hospital serves the capital of Georgetown and beyond. A new five-operatory dental clinic has been constructed beside the hospital and now offers quality dental care by Drs. Anugerah and Torres. Though Guyana's economy struggles at times, our hospital is stable and is well recognized throughout the country. It serves as the clinical base for around 20 community physicians.

belize

La Loma Luz Hospital serves the southwest part of Belize, though patients come from far away to seek its services. Grant and Ardis McPherson completed their long term of service and have retired to Florida. Negotiations are underway for a new administrator. The dialysis unit provides valuable service to a wide area. A fence has now been constructed around our 50+ acres of property for security. Continued upgrades to the hospital building and equipment have been completed. La Loma Luz remains a favorite of mission groups as well as our Loma Linda students.

honduras

Some years ago, the staff at Hospital Adventista de Valle de Angeles started a clinic in the capital city of Tegucigalpa to bolster their income and attract patients to our rural hospital. This clinic was recently moved, expanded and is now attracting community doctors to work there in its various services. It has become a major part of our health services in the country and holds the potential for becoming a major revenue center. Patient count remains low at the hospital, though the administration is now launching some new initiatives. Joel and Jennifer Mundall continue to anchor this institution while also helping in the city clinic.



Above: Justin and Shari Kim are recent graduates that have decided to work in Haiti. Featured above they pose with a care package that was sent to them over the holidays.

This island resort in the south Caribbean is home to one of our smallest, yet most successful hospitals – Antillean Adventist Hospital. Cenaida Panneflekk and her team have upgraded the facility and are actively looking to expand their services to other sites on the island. They are self-sufficient financially and have donated to assist their sister AHI institution in Venezuela.

curacao

venezuela

Our hospital in Barquisimeto continues its long path of development. They are nearing completion of the first floor of the new building and are now securing the roof and elevator to enable them to occupy this portion of the building. The dental clinic remains active and clinical services continue in the old three-story mansion next door that has served as our hospital for many years. It is time to move into the new building! We eagerly look forward to that first step into the future. The multispecialty clinic in Caracas continues to provide a wide variety of medical and dental services to the capital city.



Above: Joel Mundall takes a few days away from Honduras to participate in the 2014 Global Healthcare Conference in Loma Linda, California. Featured above he concentrates deeply in a meeting with Richard Hart, AHI president, and Elie Honore.

trinidad

Dreams remain huge for Community Hospital of Seventh-day Adventists in Port of Spain, Trinidad. The new seven-story patient tower is up and waiting for construction to complete the inside and allow for services to begin. This imposing structure has raised many hopes across the island for expanded services to our patients. The new and greatly expanded dialysis unit is functioning well due to the dedicated service of Dr. Robert Soderblom, who spent 10 years traveling to Trinidad for a long weekend each month to establish this program. Bob deserves our accolades for this herculean task. Dr. Eva Ryckman has accepted a call to anchor diagnostic radiology at the hospital, along with her husband Mark, and moved there this April. Drs. Richard and Marlene Spann continue their inspired leadership of the hospital, carrying both clinical and administrative responsibilities. They are greatly appreciated for their commitment, hard work and political insights on navigating the politics and financial challenges required to expand this hospital.

southern africa- indian ocean division

malawi

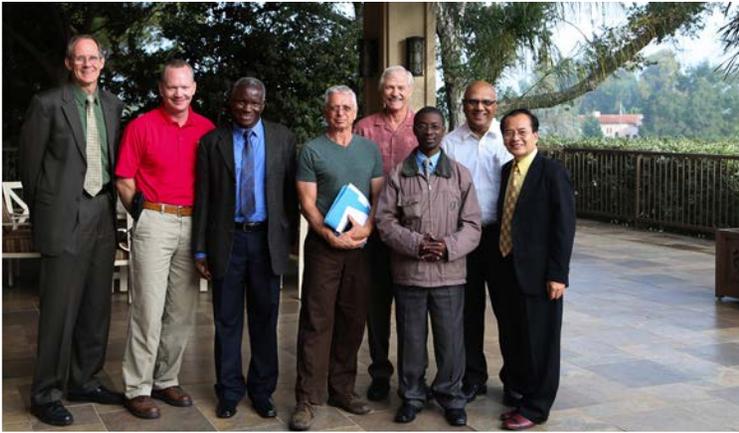
This small country, landlocked in the heart of southeast Africa, is now home to one of the strongest Adventist health systems on the continent. With two thriving hospitals, Malamulo and Blantyre, and another one on the way in Lilongwe, together with a network of 17 rural and urban health centers, it can truly be called a national system of health care. A new major urban clinic is planned in Limbe, a suburb of Blantyre, which will extend this reach even further. Several years ago, Loma Linda University designated Malamulo as a field station of the university, providing additional study and research opportunities for Loma Linda faculty and students. Additional housing for short-term guests is being planned, with rotations being set up for various students and physician residents from different specialties at Loma Linda. To accomplish these goals, it will be important for Malamulo to truly become a teaching hospital, with a wide variety of specialty services and faculty on staff. The Malamulo College of Health Sciences is included in these development plans as its student body continues to grow. Collaboration between Blantyre and Malamulo physicians and staff continues to strengthen through shared services and patient referrals. Previous land secured for the new Limbe Clinic has been expanded with an additional purchase. Now funds are being raised to start construction on this site that will provide an important outreach into a new area of the Blantyre suburbs.

Several new physicians are scheduled to join Malamulo in 2015 – Casey Graybill in OB/GYN and Tim and Claire Gobble in internal medicine and family medicine, respectively. With these additions, an additional residency program is being planned at Malamulo in family medicine. Loma Linda also plans to expand the residency rotations from its programs to include OB/GYN and Pediatrics. It is very gratifying to see Malamulo continue to develop into a modern institution that provides quality care to the rural poor of Malawi while also providing daily demonstrations of compassion and care to young professionals.



zimbabwe

While development challenges continue in Zimbabwe, the church is anxious to start long-term plans for health work. This has begun with the reactivation of the dental clinics. There is currently a clinic in Bulawayo that is operated by Jesse and Sheila Agra, and plans are also coming together to reactivate the orthodontic clinic in Harare. These are important first steps in developing health care expertise within the church structure. Long-term plans are being discussed to develop a major multispecialty clinic in Harare in the building previously occupied by the division headquarters. This is in an ideal location, with associated housing and grounds. AHI has agreed to work with the church on these plans and utilize this base to establish a national health system for the Adventist church in Zimbabwe.



Featured above are photos from when officials from Mwami and Yuka Hospitals petitioned to the Redlands Rotary Club to help fund a new tractor.

zambia

A country on the move, Zambia is laying plans for a new model of Adventist health care in Africa. With 10 acres of land deeded to the church by the City of Lusaka, AHI Zambia is raising funds for a modern multispecialty clinic. The intent is to attract young Adventist professionals to utilize this clinic as their practice location. Located in the Chalala suburb of Lusaka, this initiative will be directed by a young couple scheduled to join AHI Zambia this fall. Lauren Harris Sandefur is a pediatrician and her husband, Travis, is a lawyer with an MHA in health care administration. They will complement Paul and Janie Yoo in dentistry and ophthalmology, respectively, and Phillip Mubanga in family medicine, as part of the Lusaka-based team. This new initiative is only possible because of the growing reputation that has come to our Lusaka Adventist Dental Services under the direction of Paul Yoo and the Lusaka Eye Hospital directed by Janie Yoo. Their pursuit of modern techniques and equipment has established a standard of care in Lusaka that is drawing patients and political support for expanded services.

Mwami and Yuka Hospitals continue to provide services in their respective corners of the country. Mwami has now expanded its nursing program to three years at the encouragement of the government. AHI is seeking funds to buy a new tractor for the Mwami Gardens project to enable them to expand their tillable acreage. They have diversified their crop production to soy beans and cotton, in addition to maize. This project provides valuable income to the hospital. Expanding housing and upgrading medical equipment is always a challenge at Mwami, but progress gradually continues. The new national government is seeking to expand health care services in western Zambia, so Yuka may be more in the path of their development schemes. Only time will tell whether resources are directed to the hospital.

east-central africa division



Featured to the left is a photo of the academic health science building on campus.

rwanda

Rwanda is on a rapid development track and the church is working hard to keep up. With a beautiful new university complex on the edge of Kigali, plans are now being refined to start a full academic health science campus. A major new science building has been opened on the old campus site in the city, with plans underway to start academic programs in both nursing and medicine. Considerable work will be needed to develop the necessary infrastructure to accomplish these bold dreams. The medical school is intended to serve the entire division with its multiple countries. Mugonero Hospital is busy on the western edge of the country with its clinical programs and network of clinics.

cameroon

Civil unrest has made things very difficult at two of our hospitals in Cameroon. Koza Hospital in the north has been inundated by victims of Boko Haram, the terrorist group based in Nigeria, making it unsafe to keep expatriate staff at the hospital and even making it difficult to maintain the hospital with local staff. The threat of kidnapping for ransom is ever present. Our local staff in Koza, led by our administrator, Hamed Soule, has kept the hospital going despite these challenges. We are now dependent on contract doctors to service the hospital. Batouri Hospital in the east, against the border of the Central African Republic, has also received a number of refugees from the civil war in that country. Dr. Roger has been maintaining services in difficult circumstances and needs additional support. Trixy and Bill Colwell have returned home from Buea Hospital, and Dr. Bellosillo has been transferred there for coverage. We are indebted to the clinical work Trixy developed and maintained at Buea for five years and wish her and Bill well as they return to the USA.

tchad

What a difference a decade makes! From a struggling health center 10 years ago, Bere Adventist Hospital is now a thriving hospital with three missionary doctors, students, a network of rural clinics and thousands of patients. Olen and Danae Netteburg and Rollin Bland are very busy and are making a huge difference in this part of Tchad. Two hours away in Moundou, the commercial capital of the country, Scott and Bekki Gardner are continuing development of the small hospital James Appel began there just a few years ago. This institution has established itself as a place of quality care, with referrals for a variety of complicated cases. Now James and Sarah Appel are out in the eastern part of the country, near the Sudan border, starting a third hospital in a village called Abougadam near the city of Abeche.

Over the past 10 years, Tchad has become a destination of choice for many young professionals. Initially fueled by James' imploring stories, others have now picked up the story line and keep growing the intrigue of this struggling, yet fascinating country. With the Appels' move to the Muslim east of Tchad, the Adventist Church has a widespread health network in this country and is starting to look at sustainability issues. This will include training programs, starting first with a School of Nursing in Bere. Donor-provided buildings have made this possible and work has begun recruiting teachers and working on a curriculum. Effective development requires long-term strategies, with the ability to both sustain and replicate. As Tchad starts into this next phase of its development, pray that God will continue to guide and protect these pioneers on the cutting edge.

liberia

What a year it has been in Liberia and especially at our Cooper Memorial Hospital in Monrovia. While just getting on its feet during the first half of the year with the arrival of Gillian Seton, our young surgeon, Cooper got hit with the full force of the Ebola epidemic. Gillian's decision to stay on and keep the hospital open led to the need for clinical help, answered initially by James Appel coming down from Tchad. When James returned home for the birth of his son, experienced surgeons Greg Shank, and then Greg Saunders, answered the call to work with Gillian and keep the hospital functioning during the height of the epidemic. Closed twice when our staff were exposed to actively infected patients, the hospital reopened each time and continued to provide valuable services to all those patients needing care for non-Ebola crises, such as pregnancy complications, surgical emergencies, trauma, malaria, etc. Our deepest gratitude and respect goes out to our local staff and visitors who labored in this dangerous environment to bring comfort and healing to this ravaged nation. It was an honor for AHI to assist in providing the necessary financial support and protective equipment to make this endeavor possible.





Waterloo Adventist Hospital located in Sierra Leone, Africa.

sierra leone

Next door to Liberia we faced similar issues at Waterloo Hospital near Freetown. Minimally staffed to begin with, Waterloo took on the challenge of caring for whoever came to their door. When some of our staff workers became infected with Ebola, the hospital had to close and quarantine its staff. The government then asked to convert our hospital into a triage station for Ebola patients. They provided some capital assistance, but it was soon evident that our staff would need to continue to anchor the hospital, which they did and are continuing to do. While the epidemic is slower to resolve here than in Liberia, it is gradually improving and our staff are preparing to once again operate as a private hospital in a post epidemic country.

southern asia division

nepal

Scheer Memorial Hospital has long been a favorite for students and faculty that visit from Loma Linda. Situated several hours out of Kathmandu, it has a solid reputation among the local population. It has recently undergone another leadership change, with Dale Mole, a physician retired from the US military, now serving as CEO. AHI has been asked to become involved due to the personnel and financial concerns and the value in maintaining this institution in Nepal. We look forward to a viable relationship that can strengthen the operations and service opportunities of this facility.



Above: James Appel poses for a photo with co-workers at Seventh-day Adventist Cooper Hospital in Liberia during his time fighting the Ebola epidemic.

Right: Dale Mole, retired US military, now serves as the CEO of Scheer Memorial Hospital, also featured to the right.



statements of financial position

	(unaudited) 12.31.14	(restated) 12.31.13
Assets:		
Cash and cash equivalents	\$2,367,669	\$1,080,841
Other receivables	38,368	84,081
Total assets	\$2,406,037	\$1,164,922
Liabilities and net assets:		
Accounts payable	\$81,457	\$80,552
Total liabilities	81,457	80,552
Net assets:		
Unrestricted	255,040	0
Unrestricted, board designated	210,000	56,726
Temporarily restricted	1,721,280	890,996
Permanently restricted	138,261	136,648
Total liabilities and net assets	\$2,406,037	\$1,164,922

2014 financial statement



statements of activities

For the years ended
December 31, 2014 and 2013

	Unrestricted	Temporarily Restricted	Permanently Restricted	2014 Total	2013 Total
Support and revenue:					
Contributions	\$619,633	\$1,675,871	\$0	\$2,295,504	\$1,020,489
Interest income	36,229	9,805	1,613	\$47,646	45,825
Other income	38,987	10	0	\$38,997	69,001
Total support and revenue	694,850	1,685,686	1,613	2,382,148	1,135,315
Expenses:					
International programs	64	906,864	0	906,928	1,013,873
General and administrative	230,540	0	0	230,540	195,850
Fundraising	4,470	0	0	4,470	21,086
Total expenses	235,074	906,864	0	1,141,939	1,230,809
Net transfers	(51,462)	51,462	0	0	0
Change in net assets	408,313	830,284	1,613	1,240,209	(95,494)
Beginning net assets	56,726	890,996	136,648	1,084,371	1,179,864
Ending net assets	\$465,040	\$1,721,280	\$138,261	\$2,324,580	\$1,084,371



what would you like your legacy to be?



Will you help ensure that overseas Adventist hospitals are thriving entities that provide compassionate, quality care for women, men and children?

By including Adventist Health International (AHI) in your estate plans, you will share in this vision for these hospitals' futures.

Your legacy can make a difference for hospitals' capacities to serve, extending the teaching and healing ministry of Jesus Christ.

I have already included AHI in my will and estate plans.

I am interested in more information on how I may include AHI in my plans.

Name

Address

Phone

Email



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