State of the Institution
Letter from Venkita Suresh, CEO, Hôpital Albert Schweitzer Haiti

What do you say about an institution that turned fifty years old this June, that is determined to live and wants to be loved by the Americans and Canadians, the Dutch and the Haitians, the Swiss, and the rest of the world (in alphabetical order)? You guessed it—the theme of this letter is about friends and partnerships. Let me tell you what we are doing to strengthen and rejuvenate old friendships and also seek new friends and forge new partnerships.

The Haitian Ministry of Health, the MSPP, is our key partner. Most international organizations like the United Nations, the World Health Organization, the Pan American Health Organization, and the World Bank prefer to operate in tandem with the MSPP. And we are MSPP’s strongest and most durable partner in the Artibonite. So we are conducting ongoing dialogues with them, meeting the Minister of Health, the Director General of Health Services, the Director of Health in the Artibonite department, and the Chiefs of the regional district health units in the Verrettes region. We have proposed more investment in health care with the three Ms (manpower, money, and material) and training. This cooperation between our independent institution and MSPP is the emerging trend all over the developing world where NGOs (non-government organizations) in the health sector work in partnership with the national ministries of health.

As you know, MSF (Medecins Sans Frontieres) is another important partner in the Artibonite. They have developed an effective, efficient, and economical primary care facility in the nearby town of Petite Riviere. We remain their referral center for secondary care. Strengthening and supporting their program works in our best interests.

We receive grant support for our work on maternal and child health, HIV/AIDS, tuberculosis, and malaria from organizations including Save the Children, Enfants du Monde, UNICEF, Management Sciences for Health, Global Fund, and Catholic Relief Services.

We have been developing better cooperation with these partner-friends, putting the programs ahead of problems, to benefit the long-suffering and incredibly patient Haitian farmers and their families! Community Development is exploring many exciting new partnerships in reforestation, animal husbandry, and economic development. The focus now is on encouraging private entrepreneurship, farming, literacy etc.

In the last issue, I wrote about the Swiss-supported initiative to replace the near-crumbling dispensaries at Plassac and Gabrielle and to improve our other dispensaries and health centers. In addition to rebuilding the facilities, we need financial support to upgrade training and equipment so they can better serve the communities. We would be grateful to receive suggestions from you about possible funding sources for both projects. Packages for funding proposals are readily available from the Pittsburgh office.

Our individual friends are as important as our institutional friends. Our supporters, alumni, and the Swiss Partnerschafts stand by us in good times and difficult times alike. We are deeply grateful to them all.

A bientôt!

Children Receive Anti-Retroviral Treatment for AIDS

Yen Len Tang, M.D.

Children are more vulnerable than adults in terms of healthcare because they have less of a voice and fewer advocates and, consequently, less access to resources. In the treatment of AIDS worldwide, these conditions have meant that children are started on anti-retroviral treatment later than adults.

When I came to HAS for the first time in 2004, HAS did not yet offer HIV treatment to adults or children. But by the time I returned in 2005 as a long-term pediatrician, HAS had begun a treatment program for adults. I was eager to start a program for children as well.

We began compiling a list of HIV-positive children and conducting laboratory tests to determine who was eligible for treatment. In collaboration with Dr. Olibruce, the director of pediatrics, Dr. Daniela Jouillette, the coordinator for the HAART (Highly Active Anti-Retroviral Therapy) Program, and Nurse Practitioner Kerry Kelly, the clinical director of the HAART program, we obtained medication and coordinated the necessary social workers, accompagnateurs, and pharmacy support to begin treatment. Voluntary accompagnateurs observe patients at home to ensure that they take their medications properly.

(continued on page 3)
HAS Celebrates its 50th Anniversary
Ian Rawson, HAS Board Chair

The formal celebration of HAS’ 50th anniversary started with a reception in Port-au-Prince, organized by the Haitian Alumni Association, under the leadership of former HAS Board member Dr. Jacqueline Gautier. The event was attended by nearly 100 alumni and friends of HAS.

At the hospital, several days later, the anniversary was commemorated by a two-day event featuring local musical groups and a formal ceremony, organized by a committee of community leaders and hospital employees. See http://www.hashaiti.org/a5d.html for photos and more details.

Visit to Lambarene
Lucy and I were privileged to visit, for the first time, Dr. Schweitzer’s hospital in Lambarene in late June. It was exciting to visit the historical site, and to see Dr. Schweitzer’s desk (below), from which he wrote many of his books and articles, and occasional letters to a Mr. Mellon in Arizona, encouraging his interest in medical service.

It was also interesting to see the modern 200-bed hospital, which is a regional leader in health delivery and medical research. A slide show overview of the hospital is available on the HAS website at http://www.hashaiti.org/D2.html.

Future 50th Anniversary Events
Receptions and events celebrating the hospital’s 50th Anniversary have been held in Haiti and Europe, as noted above, and also in Palm Beach, and the state of Washington. September will be busy with events in Shreveport LA, Burlington VT, Essex CT, and Pittsburgh PA. In August of 2007, the North American Alumni Association will join with the Canadian Friends of HAS to celebrate HAS in Canada. This year is a wonderful time to take advantage of this anniversary to introduce HAS to new friends. Special materials and event planning guides have been developed by the Pittsburgh office; please contact Rona or Samantha if you would like to develop an event to spread the word about HAS and its achievements: info@hashaiti.org.

Fundraising
Several of the events which commemorate the 50th have been designed as fundraisers for HAS; in this important year, our most significant fundraising goals are for unrestricted support for the hospital’s core operations. In addition, we have identified a number of specific programs for which funds could be raised. Please visit http://www.hashaiti.org/C1.html for examples, and let Rona or Samantha in the Pittsburgh office know if you would like some materials which you might use to encourage support for HAS at this time (email to: info@hashaiti.org).

European Reunion
The reunion of the European HAS alumni was held in early July in a beautiful retreat center in Morschach, Switzerland, organized by Elvira Ghioldi and an active committee from Switzerland, the Netherlands, and other European countries. A more detailed description is available at http://www.hashaiti.org/A5b.html.

Photos above by Merilus Destyl.

Photo by Ian Rawson

Photo by Rolf Maibach.
Hospital News

Restructuring: HAS is in the process of restructuring with two main goals: (1) To bring expenses in line with income, and (2) To make health care more efficient and cost effective and provide advanced care to the periphery of the district while reducing care that needs to be given in the hospital.

We are rebuilding the Plassac and Gabriel dispensaries and renovating others with funds from the Swiss Government. Dispensaries and health centers will soon provide some beds and a greater number of laboratory tests. The retraining program for Community Health staff will create a single class of healthcare workers who can interchangeably fill various staffing roles. We are seeking funds to support the retraining project.

At HAS, as elsewhere, in-hospital care uses the most resources. As part of the financially-necessary restructuring plan, HAS is once again enforcing its original policy of accepting out-district patients only in true emergencies. As a consequence, the hospital census is down and hospital beds have been gradually reduced from 160 to 100.

The overnight ward has been restored to its original intent: patients may be admitted for one night's observation but in the morning must either be admitted to the regular ward or discharged. Previously, the overnight ward had gradually transformed into a regular ward where patients stayed for days.

Clinic visits have been reduced from 6000 a month to 3500-4000 a month. Previous studies had shown that 60 percent of clinic visits were return appointments given by HAS physicians to patients they had seen. The medical staff is now referring patients back to their respective dispensaries for follow up care. As a result of the reduced census, the hospital is less crowded and more sanitary, and support services such as lab and x-ray function better.

Where have all the patients gone? Many out-district patients who previously relied on HAS are now served by the expanded primary care facility of Medecins sans Frontieres in nearby Petite Rivière. HAS no longer lives "in splendid isolation," but actively collaborates with other organizations to strengthen the overall quality of health care in the area and to share the burdens.

Department of Social Services: Pastor Luckner Thelius heads the newly established Department of Social Services. The department's main duties are twofold: it adjusts hospital fees for those who cannot afford them and it provides vouchers to the neediest hospital patients to purchase meals in the local market. (The hospital kitchen is closed and HAS no longer serves meals to patients with the exception of a nutrition program for malnourished children.) The new policy ensures that our neediest patients do not suffer from HAS's recent restructuring and financial belt-tightening policies. The liberal voucher policy ensures that no one goes hungry, and provides funds that stimulate the local economy while saving HAS $5,000 per month.

Retirement: Over time, the hospital payroll had ballooned to over 800 employees; it constitutes a high percentage of HAS expenses. To cut costs, HAS is offering a voluntary retirement package that 106 employees have chosen thus far, thereby reducing the payroll cost by 25-30 percent. Further reductions in the work force are planned.

Children Receive Anti-Retroviral Treatment for AIDS (continued from page 1)

Treating children for HIV is at once direct and complex. It is paramount that children take their medication regularly, twice a day, without skipping dosages. But, as every parent knows, getting medicine into kids can be a challenge. So much of our efforts needed to focus on one thing—getting the medicines into the children.

We have been able to start several children on anti-retroviral treatment in the past months, and we plan to continue adding children to the program. The need for treatment was there all along, but the urgency was driven home when three of eleven children on the original list died before we could start treatment.

Thankfully, we had had some successes. The first little girl (18 mos.) whom we started on treatment had been failing to grow and develop neurologically. She had chronic persistent infections. She first came for a clinic visit when Dr. Joia Mukherjee, the medical director of Partners in Health (Paul Farmer's organization), and others from her HIV team happened to be visiting HAS to assist us in starting our pediatric program. Joia examined the little girl, spoke with her discouraged and crying mother, and confirmed that the child should be started on treatment. But we did not yet have the pediatric syrups available. Our pharmacists cut the adult tablets into 1/4 and even 1/8 to provide the appropriate dose.

Two weeks later the little girl was doing very well and her thankful mother was happy and smiling.

Since then, several other children have been started on treatment. One, a little boy who was malnourished and weak, gained 2 kg within a week and a half of treatment. Another 2-year-old boy on tuberculosis treatment and recovering from severe malnutrition and pneumonia is making slow but steady progress, gaining weight and becoming less irritable as the days go by.

Such successes indicate that AIDS treatment works in the developing world. We are grateful to Catholic Relief Services and the Global Fund for providing the needed medications and other resources.

Mini-Profiles: HAS Pediatrics

Hesley Olibruce
Chief of Pediatrics and Assistant Medical Director
Hesley Olibruce is a Cap Haitien native and graduate of the State University in Port au Prince. Prior to his arrival at HAS, Hesley completed a residency in pediatrics at Port's City Hospital and then worked for ten months at the hospital in Pignon. Hesley appreciates HAS's strong commitment to serve the poor.

Yen Len Tang
Yen Len is a pediatrician from San Francisco, California. Born in Taiwan, Yen moved to the US at the age of three. A graduate of Johns Hopkins University and its medical school, Yen took a detour between his undergraduate and medical studies to serve in Botswana as a Peace Corps volunteer teaching science and math. After a pediatric residency at the University of California, San Francisco, Yen worked as a pediatric hospitalist for Kaiser Permanente, serving as assistant Chief of Pediatrics. He came to HAS as a short-term volunteer in April 2004, and after his student loan debts were paid off, returned to HAS long term. He has a ten-year-old son who skateboards and rock climbs with him.

Yen Len Tang, M.D. (Photo by Marie Durquet)
**Staffing Update**

**Medical Director**

HAS says so long and thank you to Bob and Mary Jane Carraway, who leave HAS after five years of distinguished service. Bob served as Chief of Medicine for the duration, and the last two years as Medical Director as well. During her tenure, Mary Jane not only established a physical therapy service, but assured its continuity by training her successor.

Bob and Mary Jane were pillars of the HAS community and could be counted on to provide calm and level-headed support to staff and especially newcomers. They were rightfully recognized for their sensitive and compassionate work in the hospital and the community. In just one example, Bob assumed in-home care for a family with a rare neurological condition whose members are unable to travel. Bob and Mary Jane raised funds for the support of this progressively disabled family, an effort that will be carried on by Kerry Kelly.

Before this recent five-year commitment, Bob and Mary Jane came often as short-termers and, happily for us, plan to do so again. The Deschapelles community demonstrated their love and appreciation for the Carraways at several festive parties before their departure.

Chandon Chattopadhyay has been named the new Medical Director. A Swiss-trained pediatrician with an advanced degree in international health, he has extensive prior experience working and managing a health center in Calcutta that provides both treatment and preventive services for the poor. Chandon’s prowess in several languages, including French, Creole, English, German, and Bengali is a great asset to his work at HAS. Chandon will use his experience with both in-hospital clinical and community-based public health systems to integrate HAS’s hospital and community health programs more fully than ever before. Chandon’s appointment is supported by funds raised by the Swiss Biel Partnerschaft.

**Chief of Medicine**

Venkita Suresh has assumed the post of Acting Chief of Medicine. Partly in order to conserve HAS funds, Suresh has added the duties of Chief of Medicine to his already significant load as CEO. He is pleased to have the opportunity to care for patients and to teach again.

**Chief Financial Officer**

HAS welcomes Magalie Jeanty Saoud as the new Chief Financial Officer. Magalie has a degree in accounting from the State University in Port au Prince. She brings extensive experience from her previous position with the accounting firm KPMG in Port au Prince. She has gained rapid understanding of HAS’s complex accounting issues which, besides the management of the payroll and HAS-based department finances, include grants management and interfacing with the Pittsburgh office. Magalie brought her young son, Christian, to live in Deschapelles, while her husband, Stephan, a businessman in the town of Cabaret, assists with grants management on a part-time basis.

HAS proudly welcomes two children of previous employees to its staff. They are Ruth Oceean, MD and Pierre Kedner.

Ruthie is a graduate of one of the relatively new, private medical schools in Port au Prince, the Université Notre Dame Haïti. Since completing her social residency in Hôpital Rivière du Nord two years ago, she has worked at HAS. (Incidentally, Hôpital Rivière du Nord is where HAS board member Paul Derstine began his Haitian career as an administrator many years ago.) Able to work in either medicine or pediatrics, depending on the greatest need, Ruthie concentrates on pediatrics, a discipline in which she hopes to specialize. Ruthie’s parents are from Verrettes and Deschapelles, and she grew up in Deschapelles while her father, Nicolas, ran the HAS lab for 20 years.

Pierre has worked at HAS since 2002 and has risen to the position of Director of the Department of Support Services. His formidable portfolio includes work at the front desk, in the departments of Social Services and Medical Records, and as supervisor of the clinical assistants. In addition, he sits on the Restructuring Committee and assists with the preparation of statistical reports.

Pierre’s late father worked at the front desk and his mother in the HAS laundry. Pierre’s wife currently works in the operating room. He and his wife are raising a daughter in Deschapelles. Pierre was born in Deschapelles, and attended school there and in Verrettes, going on to obtain a degree in administration from the State University in Port au Prince and a certificate in human resources from the University of Bordeaux in France. Pierre’s higher education was sponsored by HAS alumna Alice Godfrey. “Dr. Godfrey and I e-mail each other almost every day,” says Pierre.
Alumni Profile: Dr. Gerard Frédérique

As HAS celebrates its 50th anniversary this year, so do we celebrate Dr. Gerard Frédérique’s (Freddy’s) fifty years of service and support to the hospital.

In 1956, Freddy was a resident in ophthalmology in Port au Prince, training with one of Haiti’s few ophthalmologists, George Hudicourt. Dr. Hudicourt brought Freddy to HAS, where he helped HAS ophthalmologist Norma B. Ellis operate. While at HAS, Freddy met Murray McCaslin, Chief of Ophthalmology at the University of Pittsburgh, who also worked at HAS short term. Dr. McCaslin accepted Freddy for a residency in ophthalmology at the University of Pittsburgh, his stay there supported by a Mellon-Scaife fellowship. In Pittsburgh, Freddy was mentored by HAS treasurer and board member Addison Vestal. Mr. Vestal and Freddy had lunch together on a regular schedule, and Freddy occasionally helped Mr. Vestal raise funds for HAS by giving talks to small groups of supporters. After completing his residency, Freddy became the first Haitian ophthalmologist to be certified by the American Board of Ophthalmology.

Before leaving for Pittsburgh, Freddy had met a young Mennonite nurse from Lancaster, Pennsylvania, Esther Eshleman (Esh), who was also working at HAS. They carried on a long-distance romance, were married in 1963, and returned to serve at HAS. Altogether, Freddy spent ten years at HAS, the last six with Esh. Both Freddy and Esh were key players in the Deschapelles community. In addition to contributing professionally, they served as the bridge between the Haitian and foreign communities. Both were close friends and staunch supporters of the Mellons. Freddy and a group of other Haitian physicians, notably René St. Leger, founded L’Escale, the village for tuberculosis patients that Freddy helps support to this day. Freddy’s close friend, the late art dealer Issa El Said, also supported L’Escale.

Freddy and Esh continued to support HAS even after they left the hospital to raise their three children in Port au Prince. Their house in Port served as a way station for all HAS staff and families on their way in and out of Port au Prince. The Frédériques performed innumerable trouble-shooting favors for the Mellons, HAS personnel, and the institution. Most notably, Freddy was instrumental in getting President Jean Claude Duvalier to exempt HAS from a new 1984 law that would have imposed import taxes on fuel and petroleum. The exemption amounted to a crucial savings of at least $100,000 a year at the time.

Inspired by the Mellons, Freddy and Esh created Eye Care Haiti, an organization promoting eye care for poor people in Port au Prince and the city of Mirebalais. They worked closely with Sister Joan and Freddy operated at Ecole St. Vincent, the orphanage she ran in Port au Prince, performing about seventy pediatric eye operations per year.

Freddy and Esh have three accomplished children, Gerard, Lise, and Anny, all of whom currently live with their families in the United States. Anny worked at HAS in Community Development for a number of years. Esh died tragically in 1986. Eventually, Freddy remarried Myrtho, gained a stepdaughter, Gaelle, and they had a daughter, Patrice. Myrtho also died too young in 2000.

Freddy says of the Mellons:
Dr. Mellon had a big heart; he was not thinking of himself. He did not know what he was getting into. He assumed a tough job and then stuck with it. A Haitian dollar given to him meant more to him than a million given by a foreigner. He had more patience with Haitians than with blains. I love my work and my people; Dr. Mellon taught me how to do it. Mrs. Mellon was endured. She taught me many things, among them how to be on time. She loved the people she worked with and helped a lot of people. She, too, had a big heart. The Mellons left the world better than they found it.

So have the Frédériques.

Gwen Mellon dancing with Dr. Gerard (Freddy) Frederique (photographer unknown).

Nice Ideas

HAS thanks Dr. Jim Andre and Phigienie Francois, Dr. Kate Stein and Duncan Givans, and Alison Stein (daughter of alumni Drs. Steve Stein and Emily Fine) and Tom Berenberg for their thoughtfulness in suggesting donations to HAS in lieu of wedding gifts. Our congratulations and sincere good wishes to all of you.

HAS congratulates and thanks Claire Ryder of Cleveland Heights, Ohio, for asking her friends to donate to HAS on the occasion of her 11th birthday!

Medical Publications


The orchard at Deschapelles, Jaden L'Espwa (garden of hope) has a philosophy: (1) We demonstrate that nutrient-poor Haitian soil can be made productive, using resources available in Haiti; (2) We reproduce unusual plants and trees, even citrus, mango, and avocado trees, through grafting and planting seeds, and share them with the neighbors, providing them with an economic crop; and (3) We follow organic gardening methods, using only organic fertilizers and pest control compounds.

Shortly before Mom [Mrs. Mellon] died, she received an Albert Schweitzer Award from Johns Hopkins University which included a monetary sum. She knew exactly what she wanted to do with that award: create an orchard in the field between the hospital and the canal. When she died, I seized the opportunity to put her wish into effect.

Before we began, the field was eroded, containing only scrubby trees and calcified soil typical of much of the soil of Haiti. We enclosed the field with chain link fencing which we were able to get at wholesale cost. A U.S. work team joined with folks in Haiti to plan out the orchard. Isabel Fur-laud, from Florida, purchased and carried down about twenty citrus trees in duffle bags. To plant them, another work team and the

Jaden L'Espwa
Jenifer Grant, HAS Board Member

and potassium. When we needed additional manganese, the organic solution turned out to be a sprinkling of Epsom salts!

We have done periodic soil tests. In 2002, tests done by the people at Bartlett Trees showed very degraded soil. However, our most recent testing showed that, four years later, the soil is now in balance. We have reclaimed and made the soil productive.

The orchard is about to mature and become a large-scale producer. Until this year, Levy gave all the produce either to the hospital for the patients or to L'Escale (the tuberculosis patient village). Our goal is to have the orchard become financially self-sufficient, with the produce providing the money needed for salaries and equipment.

In addition to a large grove of oranges, limes, and grapefruit which came from the Community Development Ti Jaden Pépinière [nursery], we have “Isabel’s Grove,” the grove of citrus from Florida, including tangerines, mandarins, ruby red grapefruit, and Meyer lemons. The alle of orange trees that leads to the cemetery consists of juicy Shelton oranges which came from the south of Haiti. We have seven Madagascar lemon trees which we grew from seeds sent to us from a source in Florida. Levy has already propagated and disseminated a second generation of seedlings to neighbors.

Early on Levy planted some coffee trees and cacao trees. They flourish despite our relatively low altitude. We have now planted coffee and cacao in the previously bare fields between the canal and Kay Mellon. Levy has assured a supply of cacao by creating seedlings and sharing them with neighbors. That way he will have a supply of cacao beans for his chocolate production, and the neighbors will have an economic crop.

The orchard is a place of peace and hope, a veritable Eden. More and more people find the orchard to be a wonderful place to sit and contemplate, away from the hurly burly of the hospital and Deschapelles. I am sure that Mom and Larry rest more comfortably knowing that this field, previously neglected, is now both beautiful and productive.

This last gift of Mom's to HAS is one that will keep on giving for many years to come.
**IN MEMORIAM**

**Nicole Noel Reid**
We remember with great sadness the untimely passing of Nicole Noel Reid in February 2005. Nicole was the loving and devoted wife of former HAS surgeon and Alumni Association President, Gerald Reid. Gerald now runs a highly successful private practice in Walpole, Massachusetts and Nicole and Gerald remained staunch supporters of HAS for many years after they moved to the US. We, the members of the Alumni Association Executive Committee, recall Nicole as a beautiful and gracious hostess to a number of our meetings. Our thoughts and sympathy continue to go out to Gerald and his family for this huge loss.

**Paul Baxter, M.D.**
A well-loved pediatrician in the Rochester area for over forty years, Dr. Baxter passed away February 24, 2006. A graduate of Johns Hopkins Medical School, Paul established a private medical practice in Rochester, New York. Along with his wife, Letty, Paul was a devoted humanitarian, volunteering his service to Monroe County, serving as Medical Director of the School of the Holy Childhood, and working as a pediatrician at the Albert Schweitzer Hospital in Haiti. They commented in the HAS directory, “The time spent at HAS has been one of the high points of our lives.” HAS was honored to receive contributions in Paul’s memory.

**Pauline King**
Pauline originally visited Hospital Albert Schweitzer Haiti with the Mennonite Central Committee, and later returned to serve as a secretary at the hospital for several years in the mid-1980’s. She held fond memories of the hospital’s founders, Larry and Gwen Mellon, and kept in touch with other HAS alumni throughout the years. Pauline passed away March 10, 2006, and her children thoughtfully established a memorial fund at HAS in her honor.

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**Mark the Date**
HAS North American Alumni Association Reunion
August 10-12, 2007, Hamilton, Ontario, Canada

**Please Join Us!**
HASAA annual dues are $35. These funds help us support HAS in many ways, from staying in touch with you to planning reunions. Please send your 2006 dues today to John Judson, 512 Bridgeville Drive, Lemoyne, PA 17043.

**Share HAS with Your Friends**
Please forward this newsletter to HAS friends and other alumni who might not be on our mailing list. Your assistance is very much appreciated.

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**The Purpose of This Newsletter**
The editors are grateful for your comments and feedback on our still relatively new electronic newsletter. With your feedback in mind, we thought it might be helpful to clarify the purpose of this publication as we see it. First and foremost, we want to help maintain the connection we all have with HAS and with each other by providing information on HAS-related activities such as reunions and on the involvement and activities of alumni. We also research and write concise articles on program and personnel developments at HAS. We strive for accuracy in what we write, but the content of the newsletter is, of necessity, patchy. A comprehensive review of HAS policies and overall operation or an analysis of the complex Haitian political situation is beyond the scope of our time, resources, and mandate from the institution. However, in response to some of your requests for such information, we are adding a standard feature on the “state of the institution” to be written by the HAS CEO. You can, of course, find additional information at any time on the HAS web site: [http://www.hashaiti.org](http://www.hashaiti.org).

Also, please recognize that this newsletter is a completely volunteer effort by the editors grafted on to full-time jobs unrelated to HAS. We thank you for your continued support and interest.

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**Making a Difference**
HAS is grateful for the meaningful support provided by alumni and friends around the world. Here are a few of the ways in which people support the hospital.

**Aqueduct Society**
Please consider naming HAS in your will. Our legal name and address is:
Hôpital Albert Schweitzer Haiti
P. O. Box 81046
Pittsburgh, PA 15217
412.361.5200

**Create a Charitable Gift Annuity**
A charitable gift annuity provides a way to contribute to HAS, receive a generous, guaranteed income, and benefit from tax savings. HAS will be the eventual beneficiary of the annuity.

**Contribute to the Annual Fund with an Automatic Monthly Credit Card Deduction**
Visit the HAS web site to download a monthly deduction form: [http://www.hashaiti.org/C1.html](http://www.hashaiti.org/C1.html).

**Make a Memorial Contribution**
Honor the memory of your loved ones through a memorial contribution to HAS in their name.

**Honor a Friend or Family Member**
Making an honorary contribution in lieu of birthday and wedding gifts supports the hospital, and introduces HAS to new friends.

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**Share the Story**
We are happy to provide video dvd’s, slide shows, brochures, and other materials that help to tell the HAS story. If you would like materials to share, please contact the Pittsburgh office via email to: info@hashaiti.org or by phone: 412.361.5200.