THE REST OF YOUR LIFE

Physicians Have Heart for Charitable Work

or as long as she can remember, Dr. Amy Kossoff has helped people less fortunate than she is.

"I was one of these kids who had probably an overdeveloped sense of justice in elementary school," said Dr. Kossoff, an internist who practices at Healthcare for the Homeless in Washington. "I was getting in trouble for defending the underdog. A close friend of mine always says to me, 'Your empathy is your best and your worst quality.'"

During her internal medicine residency, Dr. Kossoff would often foot the bill for patients who could not afford the \$5 for their Medicare prescription each month. After residency, she began working with indigent and homeless patients and continued to give money to those who were struggling to get by: an estimated \$10,000 after only a few years of practice. "It was \$81 here, \$22 there," she recalled. "It was all very small amounts of money, but usually it kept somebody in their home or bought them medicine."

In 2001, she and five other women formed Womenade, a group that throws potluck parties at least twice a year to raise money for needy people in the Washington area. Dr. Kossoff hosts each potluck at her home and most times 40-50 women attend. The minimum donation is \$35, but most women give more. Others who can't come send money, she said.

The group raised about \$6,000 at their potluck in May. "It's unpredictable how much money we'll get at each party because it [depends] on how many people can attend," she said. "Somehow the money always lasts about 6 months."

After each potluck, Dr. Kossoff serves as the point person for distributing the money. She confers with her network of social workers at area medical clinics that serve the indigent and homeless to locate recipients. "I generally try to keep somebody between me and the requests," she said.

The group also helped one man pay for dentures he couldn't afford on his own.

"For some reason, everybody thinks that because it's called Womenade that we give money only to women," she said. "That's not true. We just have only women at our parties."

In 2002, Real Simple magazine ran a story about Womenade. The exposure led to the creation of similar programs in 28 states. "A lot of the groups that spring up don't have a point person like me," Dr. Kossoff said. "A lot of them either choose an individual charity or go to a shelter and say, 'Let us know about individuals who need money.' I'm a good point person because all of my patients are either homeless or extremely poor."

It's fitting that Real Simple profiled the group, she noted, because she considers the mission of Womenade as simple. "We started it as a very simple thing, and I would like it to stay that way," she said. "It shows me that people would like to give but they don't have time to volunteer. This is an easy way to help."

The time burden on Dr. Kossoff is also minimal. The married mother of three

children estimates that she spends about a half hour a month writing checks for Womenade. She also devotes some time to readying her house for each potluck party. "But I hardly think of that as work," she said. "The party is fun."

Building Up His Hometown

Dr. Nestor P. Sanchez has always had a heart for helping disadvantaged children. For summer vacations during his residency training in dermatology and dermatopathology in Boston at Harvard Medical School and Massachusetts General Hospital, and later during his fellowship in dermatopathology at the Mayo School of Graduate Medical Education, in Rochester, Minn., he would lead a group of about 30 children from his hometown of Aibonito, Puerto Rico, to see the sights of New York City.

One year, they attended a Mets game. Another year, they took in a Yankees game. In between were tours of such sights as the Statue of Liberty and the United Nations, and a jaunt to Six Flags Great Adventure amusement park in Jackson, N.J.

To pay for the children's expenses, Dr. Sanchez, who is married and has three children of his own, sought donations from friends in Aibonito. He put up all the other money. "These were poor children," he said. "I would take some of their parents as well."

But Dr. Sanchez's charitable efforts did not stop there. After he completed his training at the Mayo Clinic, he returned to Aibonito to practice dermatology and founded La Sociedad Integra de Aiboniteños, which provides social services to poor children in the area.

The next project came in 1990, when he bought six acres of land in Aibonito and helped establish the Hogar Divino Niño Jesús, an orphanage for about 30 children with HIV. More than 200 have lived there since it was founded. The oldest former resident will graduate next year from the University of Puerto Rico. Another one attends American University.

"None of them have died of the disease," said Dr. Sanchez, who is currently professor and chairman of the department of dermatology at the University of Puerto Rico, San Juan. "Each one of them takes 15-20 pills a day for the HIV."

In 1997, Dr. Sanchez bought another lot of land for \$7,000 and established the Fondita Divino Niño Jesús, which is a soup kitchen and rehabilitation center for drug addicts and alcoholics. An architect at heart, he helped design the building. Next, he intends to build a home for the elderly. "Once it's in my mind, it will be done," he



Dr. Nestor P. Sanchez (center, in sunglasses) gives colleagues a tour of the soup kitchen/rehab center he founded in 1997.



Dr. Sanchez helped design the Fondita Divino Niño Jesús rehab center in Aibonito, Puerto Rico, for drug and alcohol abusers.

said. "This is no sacrifice; this is fun. People think it's a sacrifice, but not for me."

Dr. Sanchez, who received the 2005 Mayo Clinic Alumni Association Humanitarian Award, credits his mother and his aunt, who is a nun, for instilling in him the value of serving others. "The most important thing is to think of other people all the time and their needs," he said. "You don't need to do what I do. You can be a good human being by being helpful to your neighbor [and by loving] your mother, your wife, your son. The important thing is to care. Care about your patients, about your family. If you care, everything will be all right."

A Quest to Improve Global Health Care

In 1987, Dr. Edward J. O'Neil Jr. spent part of his fourth year of medical school working in Makiungu Hospital in Singida, Tanzania. Shaken by the poverty and suffering he saw, and stunned by the lack of basic medical care, he returned to the United States with an altered view of the world.

"I'd read about conditions in sub-Saharan Africa, but seeing it was so much more powerful than reading about it," said Dr. O'Neil, who is now an emergency medicine physician at Caritas—St. Elizabeth's Medical Center in Brighton, Mass. "For me, the most important aspect was being in the communities and working with these people, hearing their stories, and coming to understand that these weren't people who were somehow deserving of their fate as has been widely

portrayed by some circles in the United States and other countries. These were caring, loving people, people of faith, people who would give you things just for caring for them. One poor farmer offered me a goat for caring for his burns. I know he didn't have much more."

The experience in Tanzania made it "clear to me that there was a very large disconnect in our world, something that became a quest for me to understand," he said.

In 1998, that quest led Dr. O'Neil to form Omni Med, a not-for-profit health organization with a mission to provide medical assistance in Third World countries (www.omnimed.org). Omni Med currently runs programs in Belize, Kenya, Guyana, and Thailand. To date, about 60 U.S. physicians have donated their time and skills in these countries. The average length of service is 10 days.

"Most of what goes on is American physicians training local physicians and other health personnel," he said. "In Guyana, though, we submitted a grant proposal to start a cervical cancer prevention program for the country. They don't have one. Cervical cancer is the most common malignancy associated

with HIV/AIDS. To me, that's the crystallization of what our program is about."

Dr. O'Neil donates 20-30 hours a week and part of his annual income to Omni Med operations. He has worked 50%-75% of a full-time emergency medicine physician's schedule since 1992. "I don't work full time; that's how I do it," he said.

Currently, he said, Omni Med's greatest limitation is resources. "We operate on about \$15,000-\$20,000 per year," said Dr. O'Neil, who lists Dr. Paul Farmer, Dr. Albert Schweitzer, and Dr. Tom Dooley among his heroes. "But the goods and services that we put out are probably [worth] more like \$350,000. We just don't have the organizational infrastructure to support doing much more."

Dr. O'Neil believes that every physician should have an opportunity to work in a developing country or in a poor setting in this country, whether it be through Omni Med or another program.

He's written two books in an effort to inspire physicians and other allied health providers: "A Practical Guide to Global Health Service" and "Awakening Hippocrates: A Primer on Health, Poverty, and Global Service," both published in 2006 by the American Medical Association. "I think physicians have very little understanding of the real power to make a difference that they have in our world," he said. "Any physician or nurse can get involved in this work and go abroad."

By Doug Brunk, San Diego Bureau