

Deciding to Become an Overseas Volunteer

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Experiences like these remind us of why we entered the field of medicine.
—An orthopedic surgeon in South Africa

Many physicians are intrigued by the idea of volunteering overseas at some point in their careers, and they are often surprised at how much time, effort, and research is needed to find a suitable placement overseas. Physicians who are in the early stages of considering volunteering overseas may ask the following questions: What types of organizations recruit volunteers? How do I prepare myself for an overseas volunteer experience? How can I create a positive and enriching experience that will broaden my understanding of medicine and also contribute to the lives of people in distant lands? How can I discover the range of volunteer opportunities available to me? This article provides an overview of the issues involved in finding the right volunteer placement. A presentation of organizations and Internet resources is also provided.

TYPES OF OPPORTUNITIES

At first, I felt like Sisyphus rolling the boulder up the mountain and every time it was on top it rolled down again. But after a while the boulder was on level ground and slowly rolled toward its predetermined destination. Little by little, volunteer by volunteer, things get better.
—A dental volunteer in Zimbabwe

There are three basic types of overseas opportunities for medical personnel—relief, service, and training and education.

Relief

Relief efforts are the most dramatic and immediate. There appears to be no end to natural and human-error disasters around the world that result in massive displacement of people and associated public health crises. In most disaster situations, local health and medical personnel are able to provide the services needed within the first 24 hours of the disaster. However, specific specialists may be needed. The American Red

Cross (Arlington, VA) and other relief agencies such as the International Rescue Committee (New York, NY), World Relief (Wheaton, IL), and CARE (Atlanta, GA) make appeals for medical personnel. Volunteers for relief efforts must be ready to leave home and go to the country in need without delay, and assignments may range from a few days to several weeks. In most cases, the volunteer's expenses are covered. Volunteers should be prepared to perform whatever medical services are needed, even if these services are not in the arena of the volunteer's medical specialty.

Doctors Without Borders (New York, NY, and Brussels, Belgium) was awarded the 1999 Nobel Peace Prize for relief work. In the nearly 30 years since the group was founded, physicians and other volunteers have worked in Nicaragua, Chechnya, Mozambique, Afghanistan, Ethiopia, Rwanda, Turkey, Kosovo, and East Timor. Although this group's efforts are widely applauded, controversy surrounds some of the international assistance provided in response to disasters.

Myths and realities of relief work. Some myths surrounding disaster assistance are outlined in an article by Dr. Claude de Ville de Goyet.¹ Dr. de Ville de Goyet has been the Chief of the Emergency Preparedness and Disaster Relief Coordination Program at the Pan American Health Organization (Washington, DC), Regional Office for the Americas of the World Health Organization (Geneva, Switzerland), since 1977. Dr. de Ville de Goyet takes issue with the following widely held beliefs:

- The affected local populations are helplessly waiting for the Western world to save them, especially in countries with a large but unevenly distributed medical personnel

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- Dead bodies cause a major disease risk in the aftermath of large natural disasters and should therefore be quickly and unceremoniously disposed of
- Any kind of international assistance is needed, and this assistance is needed immediately
- The affected population is too shocked and helpless to take responsibility for its own survival
- Life for affected populations returns to normal within a few weeks

Dr. de Ville de Goyet asserts that most disaster survivors owe their lives to neighbors and local authorities. Many countries find new strength during an emergency, as evidenced by the thousands of locals who step forward to volunteer. But disaster-affected countries often deplete their resources immediately after the event occurs and need long-term, less superficial assistance. According to Dr. de Ville de Goyet, the bulk of the need for external assistance is in the restoration of normal primary health care services, water systems, housing, and income-producing work. For example, the earthquake victims in Turkey do not need used clothing, household or prescription medicines, blood and blood derivatives, medical or paramedical personnel or teams, field hospitals, or modular medical units. They want, as do any disaster victims, to rebuild safer houses, have their typical health problems attended to at the health center, put their children back in school, and get back to their lives. Unilateral contributions of non-requested goods are inappropriate, burdensome, and divert resources from what assistance is needed most.

Suggested solutions. Dr. de Ville de Goyet suggests that increased funding for disaster preparedness and prevention is the most effective solution to the continuous problem of world disasters. Donors should commit now to strengthening the local capacity to respond to future disasters in Turkey, in the disaster-prone countries of the Americas, and other vulnerable areas. Furthermore, if relief organizations learn what action is important and what action is futile in helping countries in a state of disaster, these organizations can be better prepared to provide the most effective type of assistance.

Service

Numerous service organizations place physicians overseas in hospitals and clinics. These facilities often provide the bulk of medical care to the local population, especially in rural areas. Many of these groups are church sponsored, and volunteers should determine if this sponsorship causes any personal religious or philosophical conflicts. Many service organizations focus

their efforts on one hospital or one country, which may limit the number of volunteer opportunities. Service assignments can range from several weeks to several years. Volunteers who make a longer commitment (ie, 12 months or more) can usually expect to have their expenses covered and to receive a small stipend.

Operation Smile (Norfolk, VA) is an example of a high-profile service organization. Founded in 1982 as a private, not-for-profit, volunteer medical services organization, Operation Smile provides reconstructive surgery and related health care to people in developing countries and the United States. In addition, this organization provides education and training internationally to physicians and other health care professionals so that they may attain long-term self-sufficiency.

Physicians who volunteer with service organizations frequently travel and work in teams, and these physicians usually bring medical equipment with them. Working in teams and having access to medical equipment makes the adjustment to the overseas working environment much easier for the volunteers. However, this arrangement leaves the working environment for the local health care providers virtually unchanged. The need for more service-oriented assistance, therefore, does not diminish over time.

Training and Education

Our two months at Makerere University [Uganda] was a truly worthwhile experience. The medical pathology—from malaria to the complications of HIV and TB—was extremely challenging and stimulating. We gained copious clinical experience and felt we contributed much to the knowledge base of the medical students and residents there, all of whom were eager learners and grateful for our contributions.

—Internists in Uganda

The students are faced with the challenge of learning both the ideal and the third world way of working with patients.

—A pediatrician in Guyana

Some volunteer agencies focus their efforts on training and education. These agencies identify local health and medical personnel in developing countries and work with them to improve their medical skills and knowledge in an effort to create a long-lasting improvement in the quality of health care of the country. This transfer of knowledge and skills can take place at many levels—from rural clinics and health posts to urban medical schools and hospitals.

Specialists may be needed for these training projects. For example, Health Volunteers Overseas (HVO) (Washington, DC), recruits professionals in anesthesia,

Table 1. Evaluating One's Motivation to Volunteer Overseas

Inappropriate reasons to volunteer

- To get away from an unpleasant personal situation
- To "show them how it's done"
- To have a vacation
- To try a medical procedure or experiment that you would not try at home

Appropriate reasons to volunteer

- To give something back to the world
 - To share your skills and knowledge
 - To see another part of the world and to learn about a different culture
 - To learn something about yourself
-

hand surgery, internal medicine, oral and maxillofacial surgery, orthopedics, and pediatrics. In recruiting volunteers, HVO stresses the need for creative and flexible individuals who are willing to share their knowledge and expertise, whereas other organizations may require volunteers to have a formal academic appointment.

The level of education of the trainees in the developing country, and therefore the specific skills that are taught, vary widely among programs. HVO sends volunteer physicians throughout the developing world to more than 25 programs that vary according to the needs of the specific given country. For example, in the HVO orthopedics program in Malawi, physician volunteers focus on training Orthopedic Clinical Officers (OCOs) and assist with the continuing education and clinical work of OCO graduates. In addition, physician volunteers train medical students and registrars (equivalent to attendings) assigned to the orthopedics department at a local hospital. In Uganda, however, the training needs for pediatric medicine have been most effectively met when volunteers work directly with the physicians at a local hospital and university. This system helps the local physicians strengthen their capacity to undertake research, conduct training, and effectively promote child health care in Uganda.

Impact of teaching and training programs. Volunteer efforts in Uganda are a prime example of the lasting impact of teaching and training programs. The Department of Orthopedics at Mulago Hospital has initiated a series of regular upcountry outreach clinics designed to increase access to orthopedic care outside of the capital city, Kampala. Through these outreach

clinics, staffed by Ugandan orthopedic surgeons who are trained by HVO volunteers, hundreds of patients in need of care are seen, treated, or referred. Each physician volunteer to the Mulago Hospital can take pride in knowing that her or his efforts have contributed to lasting change, bringing better health care to patients throughout Uganda.

Challenges and rewards. Training and teaching opportunities can be the most satisfying and the most frustrating volunteer work. Volunteers have the satisfaction of knowing that they are participating in a project in which the transfer of knowledge is direct. Simultaneously, however, the frustrations are many. For example, short-term volunteers are not necessarily able to witness changes made in patient care. The rewards from teaching may be less tangible than service opportunities, in which volunteers typically see the dramatic improvement in patients, feel an immediate sense of accomplishment, and know they have made a direct contribution to the health of individual patients. On the other hand, volunteers who engage in educational activities know that the skills they teach and the knowledge they impart are part of a long-term legacy that ultimately enables countries to develop the capacity to create solutions to their own problems.

PREPARING TO VOLUNTEER

Overall, this was a once in a lifetime experience. I think the most gratifying part is getting to know the people and the exposure to their way of life. It is very satisfying to be able to give your knowledge and gain a better understanding of their current medical standards.

—A pediatrician in Guyana

There is a range of issues that physicians should consider before making a commitment to volunteer for an overseas program.

Self-Analysis and Motivation

Before deciding to volunteer overseas, a physician should undergo a thorough self-analysis, including assessment of personal goals and evaluation of personal strengths and weaknesses. **Table 1** lists some of the appropriate and inappropriate reasons to volunteer. **Table 2** illustrates some personal characteristics and traits that are required for successful overseas volunteering. Volunteers must be sure that they know what their motivation is for volunteering. An important piece of advice to remember is: Do not volunteer in order to avoid or escape an unpleasant personal situation. Although "getting away from it all" may sound like a good idea in the midst of a divorce or other personal

Table 2. Characteristics of an Effective Overseas Volunteer

Flexibility

Can you handle long delays? (eg, operating rooms typically start late due to improperly prepared instruments, lack of electricity or running water)
How do you react if your luggage is lost in a foreign country?
How do you handle a last-minute change in plans?

Creativity

Are you good at thinking of a new way to handle a situation?
Do you enjoy finding different solutions to a problem?
Are you dependent on modern technology, or can you improvise when the technology (eg, telephone, fax machine, slide projector) doesn't function?

Sense of humor

Can you laugh at your mistakes?
Do you laugh or do you get angry when things go wrong?

Personal and professional preparedness

Have you read about the region where you are assigned?
Are you familiar with the medical needs of the site?
Have you talked with people who have been to the site where you are assigned?
Have you reviewed techniques or procedures that will be appropriate in the context of the site's technologic capacity? (eg, an anesthesiologist may need to know how an Epstein Macintosh Oxford vaporizer or an oxygen concentrator work due to the lack of certain equipment)

Strong communication skills

Are you good at charades?
Are you a good—*really good*—listener?
Are you clear and concise in your use of language?
Do you ask open-ended questions?

Good interpersonal skills

Do you enjoy meeting new people and learning about them?

crisis, this motivation is unfair to the other volunteers and health care personnel.

The best way to determine if one would be a good candidate to volunteer is to learn from individuals who have already volunteered, especially volunteers who have already worked in the organization or even in the specific program. A well-run volunteer organization provides potential volunteers with resources to ensure that the candidate is able to do the necessary research.

Table 3. Professional and Personal Questions to Ask When Committing to an Overseas Volunteer Assignment

Professional issues

What are the mission and goals of the organization?
What is expected of you at the site? (eg, How many hours per week will you be working? How many people will you be teaching or treating daily? How many lectures are you expected to give weekly?)
What types of diseases, conditions, and pathologies are prevalent at the site?
What teaching materials do you need to prepare for your overseas commitment?
Who are your colleagues at the site?
Are you working as part of a team or working on your own?
What language is used at the site? If needed, are translators available?
What equipment, supplies, and drugs are available?
What equipment, drugs, or disposable supplies are needed at the site?

Personal issues

Can family members accompany you?
What is your housing situation on site?
What health precautions (eg, vaccinations, malaria prophylaxis) are needed?
Is travel insurance or medical evacuation insurance needed?
What items will you need to bring to make life comfortable? (eg, reading material, mosquito repellent, water purification tablets, adaptor plugs, shortwave radio)
Is the trip tax deductible?

This point is further discussed in the "Be Prepared" section.

Once a thoughtful, professional decision to volunteer has been made, choosing the right organization and program is essential. Volunteers should consider the questions in **Table 3** to confirm that their expectations, as well as those of the trainees, are fully met.

Be Prepared

General considerations. Regardless of the type of placement, being thoroughly prepared is the key to being an effective volunteer. Most of this preparation should take place before departing for the assignment. Volunteers can conduct research and gather information from a variety of sources, including the organization for which the volunteer is working, other people who have been to that site, the local

library, and increasingly, the Internet. The Internet is especially useful for learning about the country in which the volunteers will be working. The Internet can provide access to the country's local newspapers as well as information about the country's culture, history, and climate.

Program directors and previous volunteers. Each HVO program has a United States-based or Canada-based program director. An HVO program director is a medical professional in a program specialty area; she or he selects, orients, and places volunteers to that program. All HVO volunteers learn from the program directors the specific information about the medical problems common at the site, the types of equipment available, and the skill level of the trainees participating in the program. Program directors volunteer at the site at least once every 3 years, and they also establish contact between future volunteers with the most recent volunteers to the site. HVO also publishes and distributes reports written by former volunteers shortly after they return from the program sites. Contact with other volunteers provides the in-depth information a potential volunteer needs to have realistic expectations and to be thoroughly prepared.

Information from previous volunteers is invaluable. When speaking or corresponding with previous volunteers, new volunteers should find out how the experienced volunteers spent their time every day and should assess if their experience aligns with what the new volunteers hope to experience. New volunteers should ask the previous volunteers about problems they encountered or disappointments they experienced, and new volunteers should consider how they would react to those situations. New volunteers need to find out as much as possible about the living situation; sometimes volunteer experiences are unsuccessful because the volunteer is surprised to find living conditions more basic than expected (eg, limited electricity or running water, no hot water). The stories told by previous volunteers illustrate why the characteristics of an effective volunteer listed in Table 2 are so essential. Flexibility, creativity, and a sense of humor are personality traits that are called upon daily for a volunteer in the developing world.

Sources of Information

There are several information sources for learning more about overseas opportunities for physicians. A good general source of information is *JAMA*, which publishes a directory entitled, "Physician Service Opportunities Abroad." The most recent edition of

this directory was published in the August 4, 1999, issue.²

The International Medical Volunteers Association (Woodville, MA) maintains an excellent Web site at www.imva.org. This Web site includes a comprehensive list of organizations that place physicians and provides a wealth of information about what volunteers should expect, advice about how to prepare for an assignment, and an excellent overview of health care conditions in developing countries.

HVO's Web site is www.hvousing.org. Designed primarily to serve the needs of HVO volunteers and potential volunteers, this Web site includes descriptions of all HVO programs, news updates about the different sites and programs, and a multitude of links to other relevant Web sites. The HVO Web site is also designed to meet the needs of health care professionals who are currently overseas, providing them with links to medical search engines, online textbooks and journals, and other reputable educational sites. HVO also publishes *A Guide to Volunteering Overseas*,³ a book that is available by calling the HVO Washington office at (202) 296-0928 or by visiting the HVO Web site. This book addresses important issues, such as preparing for a volunteer assignment, taking care of personal health issues while overseas, and teaching. Finally, **Table 4** provides additional resources and Web sites for physicians interested in exploring overseas volunteer opportunities.

OTHER CONSIDERATIONS

As always on volunteer trips I learned a great deal. In particular my cost awareness was raised! When I learned that the anesthesia department reuses their disposable pulse oximeter probes hundreds of times and they try to solder the wires when they break, I was truly humbled.

—An anesthesiologist in Vietnam

Working as Part of a Team

First-time volunteers who have not traveled internationally may want to consider if they would feel more comfortable as part of a team. Many agencies send teams, ranging from 5 to 35 people. Members of the team often become close and provide a supportive environment for the inevitable times of crisis. As a member of a large team, however, there may be fewer opportunities for meaningful interaction with the hosts and colleagues at the site. Most HVO programs request one volunteer at a time. HVO volunteers often travel with their spouses or families but work individually with the program participants.

Length of Assignment

Long-term volunteers (working for 6 months or more) can expect the sponsoring agency to provide access to health insurance and language training, although these benefits vary among agencies. Some agencies also cover expenses for the volunteer's family to accompany the volunteer. Given the difficult living conditions of many of these sites, however, the presence of families (especially small children) may be discouraged.

Short-term volunteers (working for 6 months or less) should not expect as many benefits as the long-term volunteers. Depending on the site, families may accompany the volunteer at their own expense. Short-term volunteers should research the coverage provided by their own health insurance policy or investigate options for short-term overseas medical coverage.

Qualifications

Organizations vary in their requirements for a volunteer's education and experience level, depending on the work that the volunteer is contributing. Because HVO volunteers focus their efforts on training, only health care professionals who are fully trained in one of the areas of the HVO programs are eligible. HVO volunteers are often training the faculty at local universities as well as other fully licensed practitioners; therefore, the volunteers must have completed all of their United States training. Unfortunately, this requirement excludes all but senior residents as well as individuals specializing in other areas of health or medicine, but other agencies exist that are more appropriate for those potential volunteers. Residents should consider volunteer opportunities with organizations that provide relief or service rather than opportunities with a training and education focus.

Tax Benefits

Volunteers who travel overseas with a charitable organization registered with the Internal Revenue Service (IRS) can deduct 100% of their travel expenses and 80% of their living expenses. These deductions cannot be made if there is any "significant" element of personal pleasure, recreation, or vacation in the travel. Unfortunately, the IRS does not clearly define what is considered "significant"—so volunteers should be careful not to incorporate too much personal travel if they want to meet IRS deduction requirements.

SUMMARY

Come with an open mind, initiative, and the ability to be flexible and you will have a great experience as I did.

—A physical therapist in Jamaica

Table 4. Resources for Learning More About Overseas Volunteering: Organizations and Web Sites

Organizations

American Red Cross

Department of International Services

1601 North Kent Street, 2nd Floor

Arlington, VA 22209

(703) 465-4800

www.redcross.org/intl/index.html

Doctors Without Borders USA

11 East 26th Street, Suite 1904

New York, NY 10010

(212) 679-6800

www.dwb.org

Health Volunteers Overseas

Post Office Box 65157

Washington, DC 20035-5157

(202) 296-0928

www.hvousing.org

International Medical Corps

11500 West Olympic Boulevard, Suite 506

Los Angeles, CA 90064

(310) 826-7800

www.imc-la.com

International Rescue Committee

122 East 42nd Street, 12th Floor

New York, NY 10168-1289

(212) 551-3000

www.intrescom.org

Web sites

www.disasternews.com—provides information about disaster responses in both the United States and overseas

www.idealists.org—a global clearinghouse of nonprofit and volunteering resources

www.reliefnet.org—dedicated to helping humanitarian organizations raise global awareness and to encourage support for relief efforts via the Internet

Upon returning home and reflecting on the volunteer experience, almost every HVO volunteer expresses sentiments similar to the comments of one recent volunteer: "I got more than I gave. It was utterly humbling and

totally enlightening.” To volunteer overseas, a significant amount of planning and preparation is involved, and time and financial commitments associated with the trip itself are needed. Potential volunteers should seriously evaluate their motivations for volunteering and assess the realism of their goals. Discussing the decision with physicians who have undertaken a similar endeavor is essential, and consulting a mentor about the idea is also recommended. The key to a successful experience is to be prepared and to have realistic expectations, a willingness to learn, and an understanding that changes in developing countries require time and patience. **HP**

NOTE

For more information about overseas volunteering, see “Overseas Volunteering: The Antidote to Managed

Care,” by R. Richard Coughlin, MD, on page 67 in this issue of *Hospital Physician*.

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