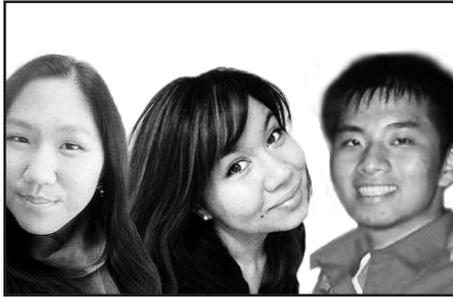


Crossing Borders and Pushing Boundaries: The Ethics of International Volunteering



Rhyanna Cho, Jennifer Edge, Alvin Keng

THERE ARE MANY ETHICAL CHALLENGES AND IMPLICATIONS OF VOLUNTEER WORK IN A GLOBAL HEALTH SETTING UNDERTAKEN BY STUDENTS. THEREFORE, SUBSTANTIAL REFLECTION REGARDING HUMANITARIAN MOTIVATIONS, MORALITY AND SELF-AWARENESS MUST BE CARRIED OUT BY THE VOLUNTEER. INSPIRED BY THE AUTHORS' EMBEDDED LEARNING EXPERIENCES OVERSEAS AS HEALTH SCIENCES STUDENTS IN THE GLOBAL HEALTH SPECIALIZATION, THIS ARTICLE WILL SHED LIGHT ON THE CURRENT EVIDENCE SURROUNDING ETHICAL DIMENSIONS OF OVERSEAS VOLUNTEERING.

What does it mean to volunteer in a global health setting? As students of the Global Health stream in the Bachelor of Health Sciences (Honours) program, we have discovered the vast amounts of ethical and personal challenges encountered when going abroad as foreign volunteers. Despite travelling to different locations for our Embedded Learning Experience placements (South Korea, Ghana, Philippines), several common themes have emerged from our dynamic experiences. As such, we emphasize the importance of developing a strong ethical foundation in preparation for the emotionally challenging situations encountered during a volunteer experience.

Every year, many students consider volunteering abroad in a global health setting. But what does 'global health' and 'volunteering abroad' encompass? Kaplan et al. (2009) propose a general definition of global health as, "an interdisciplinary and multidisciplinary field of study, research, and practice aiming to improve health and health equity worldwide". The term 'global' signifies a focus on the scope of health issues versus the location, emphasizing a "two way flow between developed and developing countries" (Kaplan et

al., 2009). Palmer (2002) describes a volunteer abroad as "...someone who willingly works overseas [most often in 'developing' countries] for a package that amounts to less than what he or she would be earning in the same capacity in his/her country of origin" (p. 637). This gives rise to a pressing question: Why volunteer in a foreign country instead of at home?

Palmer (2002) outlines two underlying motivations: altruistic and self-centric. Altruistic motivation is the desire to make a difference to those less privileged. However, the prospect of contributing to a developing country versus a developed one may seem more appealing because a more 'valuable' contribution may be made by diminishing the gap between the two worlds. Self-centric motivation refers to the desire to learn more about a culture, or to enhance career prospects.

These motivations, amongst other objectives are likely to cross an individual's mind at some point when planning to engage in an overseas volunteer experience. In the emerging trend of 'volunteer tourism', students must be mindful of the objectives of global health. Preliminary research findings by Brown & Morrison (2003) propose that volunteer tourism

encompasses two distinct participant outlooks: volunteer-minded vs. vacation-minded (or 'voluntourism' as cited in Brown, 2005). Regardless of how one ultimately chooses to sculpt their volunteer experience, as a student or a health care professional seeking global health related clinical or research experience, it is imperative to recognize that there are ethical dilemmas to be faced when interacting with highly vulnerable or marginalized groups, especially in a developing country. Without adequate preparation before departure, there is the risk of causing harm not only to oneself, but to the individuals and communities that one hopes to help.

SELF-AWARENESS

Self-awareness is essential because decisions while volunteering may result in harmful consequences. The act of volunteering is rooted in humanitarianism, and the fundamental principle behind humanitarianism is humanity, defined by Vaux (2001) as "the capacity to listen to the person in need" (as cited in Gilbert, 2005). This is easier said than done – and while attempting to fulfill this task, one may experience emotionally demanding situations.

Thus, it is argued that self-awareness is essential because the presence or absence of self-awareness can directly influence the impartial response to the benefactor (as cited in Gilbert, 2005). Emphasis on experiential group learning may help facilitate this process, with focus on relevant tasks that are emotionally stimulating, leaving individuals feeling vulnerable as they engage in critical self-reflection. One such example of an experiential group learning activity is active listening. Gilbert (2005) deems this appropriate as "one's own judgmental feelings about others, one's own value system, issues of cultural relativity, and many other disturbing feelings can be engendered" (p. 67). A crucial aspect is that trust be established within the group allowing individuals to be comfortable enough to reflect frankly on their experiences. Although this type of self-reflective process is challenging, it facilitates personal growth, strength, and awareness, which will equip the individual with the capacity to make decisions and respond appropriately with the principle of humanity in mind (Gilbert, 2005).

ETHICS: THE GOOD, BAD, AND UGLY

As a foreign volunteer, one's impact on the host community can be positive or negative, depending on how volunteers engage the community. Social developments can result on both sides wherein residents gain improvements in health, nutrition, education, or welfare service due to the work commissioned by foreign volunteers (Sherraden et al, 2008). New markets and businesses can be stimulated by the entrance of volunteers, which overlaps with the tourism market. However, this can also have adverse effects on the community. Any efforts to create an empowered self-sufficient community can be hindered by local dependency on foreign volunteers (Sherraden et al, 2008). Such an over-reliance can create a skewed image of all incoming volunteers to the communities. For example, undergraduate students with no medical training may be assumed to be doctors in developing countries as part of an organization that provides medical excursions. If such volunteers give medical care, there is a higher likelihood of harm presented to the community. Such a scenario would also violate two key principles of medical bioethics, beneficence and non-maleficence, which is the duty to improve the condition of others and do no harm (Boetzkes & Waluchow, 2002). Therefore, volunteers lacking relevant skills are potential security, health, and political hazards for their host community (Pinto & Upshur, 2009). Volunteers can also drain the community's already scarce resources without providing much added value in terms of service work. Despite the potential harm, such

humanitarian work can be both beneficial and life-changing for both volunteers and host communities. The cross-cultural component exposes both sides to new perspectives thereby aiding mutual global understanding (Sherraden et al, 2008).

One of the foundations of service-learning is to incorporate some form of personal values and ethics training for the participants (Hales, 1997). In the healthcare field, service is intertwined with the work and learning of the students. As the trend for globalization continues to surge, the demand for such experiences amongst health professionals continues to rise. Solving problems pertaining to global health requires an understanding of ethics and the moral responsibility for upholding basic human rights to healthcare (Ruger, 2006). A prime example is the growing interest in global health electives among medical students (Brewer et al, 2008). Before such international immersion work is allowed, students should undergo social preparation for the culture shock and challenging ethical situations they will face (Brewer et al, 2008). Pinto & Upshur (2009) discuss certain key principles of global health ethics, including: humility, introspection, solidarity, and social justice. Institutions that send their students on global health experiences have a responsibility to prepare them in this manner before their departure (Pinto & Upshur, 2009). From personal experiences, students should also bring a mindset to bring about sustainable change that is desired by the community. This attitude is critical to prevent further inequalities between the developing and developed worlds. The lack of this viewpoint among international volunteers has been identified as a problem by Sherraden et al. (2008).

From both a developmental and ethical standpoint, students must question whether local communities can sustain particular initiatives on their own. If a project cannot be maintained, are contributions, however substantial, making a negative impact if they become unsustainable after the volunteers leave the host community? A volunteer's success, either clinical or research-based, cannot be solely based on publication turnouts, number of treated patients, or knowledge acquisition, but based on how the priorities of the host community are met (Pinto & Upshur, 2009).

Overall, it is essential to establish one's ethical foundation prior to going abroad in order to overcome the personal challenges that will be faced. The desire to volunteer must be self-motivated and derived from a genuine sincerity to contribute in a sustainable manner. These two factors become paramount when considering that one's morals and ethics will, at times, be the only tools available to assist in withstanding and overcoming harsh obstacles such as racial discrimination, language alienation and gender inequality

that can be associated with volunteering in a foreign country. In addition, individuals should be prepared to embrace and acknowledge the influence of culture on daily aspects of working and living abroad. If an individual is not ready to respect the beliefs and customs of others, he or she will burden the local community with intolerance and emotional unpreparedness. It is essential to arrive ready to tolerate any cultural differences from one's own society and willingly demonstrate appreciation and patience when adapting to cultural norms.

While it is important to harbour the "humanitarian" mindset of making a difference in the community, one must be realistic about how much they can accomplish

given the limited skills and time constraints. Irrespective of the size of the contribution, it is important to ensure that all implementations can be sustained by the community. Though cultural appreciation and career resumé padding may be important considerations on a personal level, these should not be the primary reasons for undertaking a volunteer experience abroad. Individuals should organize their experience to be centralized around making a sustainable contribution to the community. Despite the uncertainties or fears of volunteering overseas, it is important to establish morality and self-awareness. Once these ethical roots are established, emotional aptitude and ability to work towards making an impact overseas can be ensured. 

POSTGRADUATE EDITORS IN FOCUS

Dr. Andrew Pinto is a family physician who underwent specialty training in Public Health at the University of Toronto, working frequently with the impoverished urban, rural Ontario, and First Nations populations. He is currently pursuing a Master's degree in Community Medicine at the London School of Hygiene and Tropical Medicine. He conducts international research regarding injuries associated with gun violence and the arms trade as a member of Physicians for Global Survival.

Dr. James Dwyer is Assistant Professor of Bioethics and Humanities at the State University of New York Upstate Medical School, and a member of the University Hospital Ethics Committee. He also serves as a board member of the International Association of Bioethics. Dr. Dwyer's research involves the fields of justice and democracy in relation to global health, and more recently, global migration of health care workers as well as health care professionals' obligations in epidemics. He has written for the Bioethics journal as well as the Bulletin for the World Health Organization.

REFERENCES

- Boetzkes, E. A., & Waluchow, W. J. (2002). Readings in health care ethics. Peterborough, Ont.: Broadview Press.
- Brown, S. (2005). Travelling with a purpose: Understanding the motives and benefits of volunteer vacationers. *Current Issues in Tourism*, 8 (6), 479-496.
- Gilbert, J. (2005). 'Self-knowledge is the prerequisite of humanity': personal development and self-awareness for aid workers. *Development in Practice*, 15 (1), 64-69.
- Hales, A. (1997). Service-learning within the nursing curriculum. *Nurse Educator*, 22 (2), 15-18.
- Kaplan, J., Bond, C., Merson, M., Srinath Reddy, K., Rodriguez, M., Sewankambo, N., Wasserheit, J. (2009). Towards a common definition of global health. *Lancet*, 373, 1993-1995.
- Izadnegahdar, R., Correia, S., Ohata, B., Kittler, A., ter Kuile, S., Vaillancourt, S., et al. (2008). Global health in Canadian medical education: Current practices and opportunities. *Academic Medicine*, 83 (2), 192-198.
- Palmer, M. (2002). On the pros and cons of volunteering abroad. *Development in Practice*, 12 (5), 637-643.
- Pinto, A., Upshur, R. (2009). Global health ethics for students. *Developing World Bioethics*, 9 (1), 1-10.
- Ruger, J. P. (2006). Ethics and governance of global health inequalities. *Journal of Epidemiology and Community Health*, 60 (11), 998-1002.
- Sherraden, M. S., Lough, B. J., & McBride, A. M. (2008). Impacts of international volunteering and service: Individual and institutional predictors. St. Louis, MO: Center for Social Development Working Papers.