

Experiential learning is an important component for global health programs, helping students to develop a complete understanding of the global health field by allowing them to actively participate in global learning experiences.

However, many students are pushed to perform tasks beyond their training and abilities. As the number of global health programs and student experiential learning experiences increase in number, many questions about ethical standards are being asked. Research into these unethical programs and situations has led to the development of standards and best practices for global health experiential learning.

Students, faculty, and global health programs can use this set of standards and best practices when deciding what experiential learning programs to participate in. This set of standards can help ensure that all students are able to have a valuable learning experience that is not hindered by being pressured to perform task outside of their training and skills.

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Global Health Training

Ethics and Best Practice Guidelines for Training Experiences in Global Health

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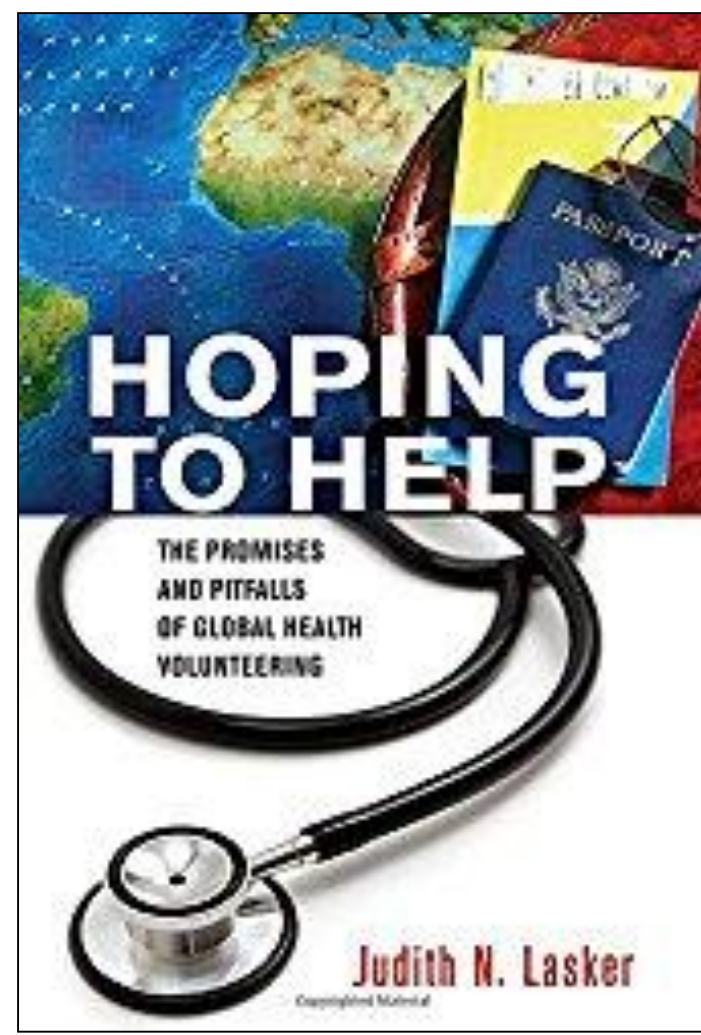
Abstract. Academic global health programs are growing rapidly in scale and number. Students of many disciplines increasingly desire global health content in their curricula. Global health curricula often include field experiences that involve crossing international and socio-cultural borders. Although global health training experiences offer potential benefits to trainees and to sending institutions, these experiences are sometimes problematic and raise ethical challenges. The Working Group on Ethics Guidelines for Global Health Training (WEIGHT) developed a set of guidelines for institutions, trainers, and sponsors of field-based global health training on ethics and best practices in this setting. Because only limited data have been collected within the context of existing global health training, the guidelines were informed by the published literature and the experience of WEIGHT members. The Working Group on Ethics Guidelines for Global Health Training encourages efforts to develop and implement a means of assessing the potential benefits and harms of global health training programs.

Subject: ADA House Resolution 31H-2010

We are writing to share with you the American Dental Association's recently-adopted policy addressing students' participation in dental outreach programs. The policy statement was first proposed by the American Student Dental Association and the Pennsylvania Dental Association last fall. The 2010 House of Delegates supported the concept and adopted Resolution 31H-2010: Participation in Dental Outreach Programs:

- Resolved,** that it be policy of the American Dental Association (ADA) that students in U.S. dental schools and pre-dental programs who participate in a dental outreach program (e.g., international service trips, domestic service trips, volunteerism in underserved areas, etc.) be strongly encouraged:
- To adhere to the ASDA Student Code of Ethics and the ADA *Principles of Ethics and Code of Professional Conduct*;
 - To be directly supervised by dentists licensed to practice or teach in the United States;
 - To perform only procedures for which the volunteer has received proper education and training.

The dedication of the growing number of volunteers who work in some of the world's most deprived communities is fully supported by the American Dental Association. However, we have expressed a range of concerns in cases that come before us about with and



THE FORUM ON EDUCATION ABROAD

Guidelines for Undergraduate Health-Related Programs Abroad

Updated March 2013

There is a growing interest in global health among college students in the U.S. Some are interested because of a passion to "help people"; others see pursuing a health related activity as a way to gain experiences that will help them be successful when applying to medical school, or another health profession. With the increase in interest in global health, has come an increase in organizations trying to serve these students, and give them experiential learning opportunities in health settings. The concern that has been raised by many focuses on the safety and ethical nature of the types of experiences these students are having when abroad. These standards have been created to support sending institutions and hosts that serve students who are involved in experiential learning in health-related settings outside the United States.

These guidelines should be used to augment The Forum's *Standards of Good Practice for Education Abroad*.

These guidelines are designed for a wide range of program types including: academic, for-

The Advisor

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Do you GASP? How pre-health students delivering babies Africa is quickly becoming consequentially unacceptable

Jessica Evert MD, Tricia Todd MPH, and Peggy Zitek PhD

Nobel-prize winner George Bernard Shaw pointed out an unfortunate paradox: "Self-sacrifice enables us to sacrifice other people without blushing." Over the last decade advisors have noted an increase in pre-health students clamoring for international experiences especially

of clinical care that results from this shortage is both naive and potentially deleterious. There are many efforts at district, national, regional, and international levels to address Human Resources for Health (HHR) shortfalls throughout the world. There is no mention of

ORIGINAL RESEARCH

Identifying Interprofessional Global Health Competencies for 21st-Century Health Professionals

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Abstract

BACKGROUND: At the 2008 inaugural meeting of the Consortium of Universities for Global Health (CUGH), participants discussed the rapid expansion of global health programs and the lack of standardized competencies and curricula to guide these programs. In 2013, CUGH appointed a Global Health Competency Subcommittee and charged this subcommittee with identifying broad global health core competencies applicable across disciplines.

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Perspective

Beyond Medical "Missions" to Impact-Driven Short-Term Experiences in Global Health (STEGHs): Ethical Principles to Optimize Community Benefit and Learner Experience

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Abstract

Increasing demand for global health education in medical training has driven the growth of educational programs predicated on a model of short-term medical service abroad. Almost two-thirds of matriculating medical students expect to participate in a global health experience during medical school, continuing into residency and early careers. Despite positive intent, such short-term experiences in global health (STEGHs) may exacerbate global health inequities and even cause harm. Growing out of the "medical missions" tradition, contemporary participation continues

to evolve. Ethical concerns and other disciplinary approaches, such as public health and anthropology, can be incorporated to increase effectiveness and sustainability, and to shift the culture of STEGHs from focusing on trainees and their home institutions to also considering benefits in host communities and nurturing partnerships. The authors propose four core principles to guide ethical development of educational STEGHs: (1) skills building in cross-cultural effectiveness and cultural humility, (2) bidirectional participatory relationships, (3) local capacity building, and (4) long-term sustainability.

Application of these principles highlights the need for assessment of STEGHs: data collection that allows transparent comparisons, standards of quality, bidirectionality of agreements, defined curricula, and ethics that meet both host and sending countries' standards and needs. To capture the enormous potential of STEGHs, a paradigm shift in the culture of STEGHs is needed to ensure that these experiences balance training level, personal competencies, medical and cross-cultural ethics, and educational objectives to minimize harm and maximize benefits for all involved.

Principle 1: Skills building in cross-cultural effectiveness and cultural humility are critical components of successful STEGHs

- Understand that (HIC) health care professions medical education is limited in fully preparing one for work abroad; predeparture training and other extracurricular professional development is necessary preparation
- Promote "explanatory models" and communication skills (e.g., Listen, Explain, Acknowledge, Recommend, Negotiate [LEARN] framework)
- If locally allowed, HIC trainees may provide supervised services within scope of training and ability as assessed in the local LMIC setting
- Recognize that trainee independence is often decreased because of language and cultural discordance, lack of familiarity with formularies, resource level, and local standards of care
- Recognize that ethics and professionalism should travel across borders

Communities of Practice Involved



WHAT TO LOOK FOR IN GLOBAL SERVICE LEARNING 6 STANDARDS OF PRACTICE TO GUIDE YOUR DECISIONS

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1 ORGANIZATIONAL ALIGNMENT

Do the sending, intermediary, and host community entities really share the same mission, commitment and capacity to collaborate? Or is one using another to achieve different goals? Do the people involved have the proper credentials to deliver what they promise? Or are they working in an uncoordinated and complex space without proven competencies?

WHAT TO LOOK FOR

- ✓ Aligned missions, equitable relations, critical thinking, and dialogue among stakeholders
- ✓ Evidence of long term commitment to collaborative practices and common goals
- ✓ Professionals with related academic preparation and professional experience in international education and community development

WHAT TO AVOID

- ✗ Organizations that are aimlessly jumping on a trend of internationalization without partners
- ✗ Conflicting academic, commercial, cultural, or community visions, values, and methods
- ✗ Amateurs with an abundance of enthusiasm and a shortage of pertinent qualifications

WHY IT MATTERS

Aligned sponsoring, intermediary, and community organizations produce more defined reciprocal public benefits and less vague mutual private benefits that advance the overall aims of global education and community development.

2 SUSTAINABLE MANAGEMENT

Are the organizations ethically managing their legal, financial, administrative, and human resource functions in compliance with formal requirements and best practices? Or are they taking advantage of unregulated spaces to operate informally? Is there openness and in-depth transparency or reluctance and superficial sharing?

WHAT TO LOOK FOR

- ✓ Civic licenses to operate and written partnership agreements with communities and stakeholders
- ✓ Proactive disclosure and explanation of financial statements and access to substantive information
- ✓ Staffing policies and manuals, codes of conduct, fair remuneration, and professional development

WHAT TO AVOID

- ✗ Organizations that are operating without any public status or established local partnerships
- ✗ Simplistic and one-time financial reporting that boasts of low overhead and impressive high impact
- ✗ Exploitation of people in uneven power relationships with less access to resources

WHY IT MATTERS

Sustainable and ethically operated sponsoring, intermediary, and community organizations have a long-term, accountable presence that engages local authorities, extends public networks, develops local capacity, and supports collective initiatives.

3 RESPONSIBLE MARKETING

How are words, images, and symbols used to promote engagement and outcomes? Respectfully, realistically, accurately, and consensually? Or do they perpetuate stereotypes, reinforce clichés, provoke pity, glorify individuals, exaggerate claims, or misuse cultural icons? Does content analysis lead to clear and mission-relevant messaging? Or to faulty assumptions and slackivism?

WHAT TO LOOK FOR

- ✓ Text that uncovers assumptions about power, privilege, outcomes, and personal agency
- ✓ Images that are genuine, balanced, and dignified that provide context and perspective
- ✓ Modest and qualified use of short and long-term claims reflective of both success and limitations

WHAT TO AVOID

- ✗ Text that presents short and easy solutions and predicts grand outcomes and amplified impact
- ✗ Images that gratuitously use or idealize children and vulnerable populations without context
- ✗ Symbols or unverifiable statistics that over-simplify complex issues and wicked problems

WHY IT MATTERS

Responsible marketing materials inform and inspire local and global engagement rooted in reality not illusion, and invite multi-faceted collective participation not one dimensional individual solutions.



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4 INTEGRATED IMPLEMENTATION

Is the program and/or project identified, designed, prepared, and implemented within a shared theory of change and operationalized in a logic model? Or is it segregated solely by function and convenience based on assumed roles? Are there common strategies, resources, and decisions? Or unrelated independent activities?

WHAT TO LOOK FOR

- ✓ Shared processes, roles, responsibilities, and solutions across organizations
- ✓ Comprehensive pre/during/post experience materials and literatures for all parties
- ✓ Connection between systemic local and global issues; interdependence not independence

WHAT TO AVOID

- ✗ Northern organizations assuming substance, Southern ones relegated to logistics
- ✗ One-sided attention to broadening the participants, but not communities, service learning experience
- ✗ Adventure-destination and consumer-oriented international travel that appropriates cultures

WHY IT MATTERS

Integrated design and implementation reduces neo-colonial tendencies while challenging and raising the capacity of all entities to demonstrate true partnership and a more equitable distribution of responsibilities, risks, and rewards.

5 PROTECTION OF PEOPLE & PLANET

What safeguards are in place to protect children, vulnerable populations, and the environment from harm? Is the need for them articulated and reflected in policies, procedures and function and convenience based on assumed roles? Are there common strategies, resources, and decisions? Or unrelated independent activities?

WHAT TO LOOK FOR

- ✓ Protocols for contact with children and vulnerable populations that protect privacy, prevent interference, exploitation or abuse
- ✓ Codes of conduct for photography that honor cultural norms and require respectful use of images by individuals and organizations
- ✓ Health, safety, and conservation practices for visits to urban, rural, natural, wildlife and heritage sites
- ✓ Carbon offset mechanisms for air travel

WHAT TO AVOID

- ✗ Unrestricted access, contact, and voyeurism of children and vulnerable populations
- ✗ Unbounded photography of people as objects, posting of images without consent, and use of images in marketing materials without recognition
- ✗ Lack of evidence of due diligence, health and safety risk mitigation, and carbon offset strategies

WHY IT MATTERS

The rights of children and vulnerable populations merit respect and legal and moral obligations exist to protect all people and our planet from harm.

6 REALISTIC EVALUATION

How are inputs, activities, outcomes, and indicators chosen to be monitored, evaluated and shared effectively? Is reliable and valid quantitative and qualitative data collected? Or are reports mostly anecdotal and episodic? What metrics are employed and who benefits from analysis? Or do feedback loops appear self-serving?

WHAT TO LOOK FOR

- ✓ Data collected by a variety of means over time from a sufficient number and scope of consenting sources
- ✓ Recognition of the complexity of evaluation and the limitations of findings – for example, deadweight, displacement, and drop-off effects
- ✓ Credibility gained from failure reporting, external evaluators and on-going research efforts

WHAT TO AVOID

- ✗ Findings derived from unreliable or invalid data
- ✗ Organizations that invest a little in evaluation and a lot in promoting simplistic results as impact
- ✗ Resistance to external critique or performance analysis

Realistic evaluation measures allow organizations to incrementally improve their efficacy and efficiency in a credible and constructive context.

USE OF THIS MATERIAL FOR EDUCATIONAL AND PUBLIC PURPOSES IS ALLOWED WITH CREDIT TO THE AUTHOR