

Improving the Quality and Value of Short-term Student Experiences in Global Health

December 5-6, 2017

Lehigh University

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Led by Lehigh University professor Judith Lasker, author of *Hoping to Help; the Promises and Pitfalls of Global Health Volunteering*, this forum brought together speakers representing the cutting edge of research and practice in this field and provided an opportunity for attendees to formulate strategies to ensure the highest quality opportunities for students. The presentations and discussions were relevant to staff and faculty in international education, study abroad, global health and development studies, pre-health advising, graduate health professional schools, and service learning who seek to provide the most valuable experiences for their students and the most value to host communities.



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An AIEA Thematic Forum

Lehigh University
Bethlehem, Pennsylvania
December 5-6, 2017

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Registration fee is \$50. To learn more and register, visit:
global.lehigh.edu/aiea

Speakers

Judith Lasker, Ph.D.
NEH Distinguished Professor of
Sociology
Lehigh University

Cheryl Matherly, Ed.D.
Vice President and Vice Provost for
International Affairs
Lehigh University

Jessica Evert, M.D.
Executive Director
Child Family Health International
Chair, Global Health Competency
Sub-Committee
*Consortium of Universities for Global
Health*
Clinical Instructor
UCSF School of Medicine

Eric Hartman, Ph.D.
Executive Director, Center for Peace
and Global Citizenship
Haverford College

Shailey Prasad, M.D., M.P.H.
Executive Director, Center for Global
Health and Social Responsibility
University of Minnesota

Sarah Stanlick, Ph.D.
Director, Center for Community
Engagement, and Professor of Practice
in Sociology and Anthropology
Lehigh University

Noelle Sullivan, Ph.D.
Assistant Professor of Instruction in
Global Health and Anthropology
Northwestern University

Tricia Todd, M.P.H.
Interim Director, Health Careers Center
University of Minnesota

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Eighty people from 28 colleges/universities and 9 NGOs attended the Forum. The attendees from educational institutions represented a variety of positions, including senior international officers, study abroad advisor, faculty in global and public health, international affairs staff, pre-health advisors, and administrators of dental and nursing schools. NGO representatives offer short-term volunteer and learning experiences in a wide variety of settings.

We gathered the evening of Dec. 5 for very lively networking over wine and hors d'oeuvres. Dr. Cheryl Matherly greeted attendees and explained the purpose of AIEA Forums and goals for this specific forum, which was to address the challenges faced in trying to offer the best possible experiences for students wanting to engage in global health activities while also honoring host communities' needs and preferences.

Dinner was followed by two presentations.

- Dr. Judith Lasker, NEH Distinguished Professor of Sociology at Lehigh University and author of *Hoping to Help: the Promises and Pitfalls of Global Health Volunteering*, provided an overview of the current state of short-term global health activities and the debate over its value. She reviewed research concluding that there are important gaps between what host communities want from visiting students and volunteers and what most programs actually do. She described the development of a coalition of leaders from all involved sectors—educational, faith-based, corporate, and NGO--that is working together to improve the quality and responsible conduct of short-term programs. There is broad agreement on guidelines for best practices but many barriers to their enactment. She concluded that benefits to students and to hosts do not have to conflict with each other but will more likely occur when guidelines are followed.
- Dr. Jessica Evert, Executive Director, Child Family Health International, Chair of Global Health Competency Subcommittee, Consortium of Universities for Global Health, and Clinical Instructor, UCSF School of Medicine, presented research on harms to patients from untrained students seeking experience and credentials. Conflicting messages from medical school admissions committees are partially responsible. However, there are improvements in the field of global health that are countering these trends, including the development of standards & best practices, competency-based programming linked to appropriate goals/competencies/objectives, legal/risk management procedures, communities of practice, and new teaching/reflection pedagogies. Research indicates a need for students to have greater understanding of host community culture and willingness to work in teams and learn from hosts. Evert concluded with questions one should ask in choosing international medical electives and standards programs should adhere to.

One Day 2, December 6, Session One was titled, “The risks for students, institutions, and host communities”

- Mr. Kim Nimmo, Lehigh University Director of Risk Management, formerly program administrator for the Office of Risk Management of the city of Washington, D.C. and Senior Risk Consultant for United Educators, addressed in detail the main issues that must be addressed from the perspective of university risk management: Program Formation and Approval, Faculty and Staff Orientation, Student Selection and Participation, On-Site Student Orientation, Managing Key Risks, and Program Evaluation. Key risks include accidental injury and death, assault,

student discipline, and discrimination and harassment. Mitigating all of these require extensive policy formulation, preparation, and communication at every stage.

- Dr. Noelle Sullivan, Assistant Professor of Instruction in Global Health and Anthropology, Northwestern University and author of multiple articles and a forthcoming book on medical volunteer practices in Tanzania, presented the findings of her extensive interviews and observations in Tanzanian hospitals. Many volunteers without medical training were able to perform minor surgeries and deliver babies. They often over-estimated their own skills and underestimated those of host professionals. Lack of adequate supervision, desire to gain experience, peer pressures, and “white savior complex” combine to put students and patients at risk.

Session Two was “Current efforts to reduce risk: models to promote better practices”

- Tricia Todd, Interim Director, Health Careers Center, University of Minnesota and co-founder and director of GASP (Working Group on Global Activities by Students at Pre-Health Levels), outlined the University of Minnesota's model for implementing change, regulating programs to reduce risk and improve quality, and preparing students. The Pre-Health Student Resource Center works with students throughout their undergraduate careers and partners with the Learning Abroad Center to monitor global health programs. Pressures from the medical school admissions process to gain clinical experience and from companies recruiting volunteers is part of what drives the demand for international experiences and must be addressed. Global Ambassadors for Patient Safety (GAPS) is an open-access set of modules for preparing students to participate in a global health experience. Her message to undergraduate pre-health students: “Don’t lose your license before you get one.”
- Dr. Shailey Prasad, Executive Director, University of Minnesota Center for Global Health and Social Responsibility and active member of GASP, reviewed the concerns around health professions students engaging in overseas health experiences. These include issues of different standards at different stages, preparation, licensing, competencies, and gaining support for responsible programs. He described the “International Elective Timeline and Checklist” developed at University of Minnesota, which specifies a timeline for 6-12 months of preparation before participating in a medical elective overseas.
- Dr. Eric Hartman, Executive Director, Haverford College Center for Peace and Global Citizenship; co-founder of GlobalSL (Global Service Learning), elaborated on the concept of “Fair Trade Learning”, summarized here: <https://vimeo.com/153249405>. The FTL model focuses on reciprocity, financial transparency, protection of vulnerable populations (especially children and specifically orphans), and facilitating growth opportunities for community members. It is primarily community-driven. Universities are increasingly adopting this model, and questions to ask organizations about their adoption of FTL principles were reviewed.

Session Three. “What are students and faculty learning about their role in the world from international service experiences?”

- Dr. Sarah Stanlick, founding Director, Lehigh University Center for Community Engagement and Professor of Practice, Department of Sociology and Anthropology, led a conversation on learning assessment and on student preparedness for learning and service experiences. She explained “values-engaged assessment” as requiring that evaluation be rooted in the (contested) values of community engagement and service learning and described the barriers to carrying out this type of assessment. “Backwards assessment” allows for deriving methods of assessment from desired outcomes. Multiple methods can be used for critical reflection which can contribute to transformative learning.

During lunch, each table had a sign with a speaker’s name so that attendees could spend more time with a speaker they particularly wanted to talk with.

Session Four. “Working sessions: topics for AIEA report of recommendations for practitioners”

- Maximizing program quality—finding best programs or designing your own.
 - Tricia Todd and Noelle Sullivan
 - Questions: How is it possible to know if an outside organization is responsible?
 - What are challenges in working with faculty who organize their own programs?
- Learning vs. “practicing”—the role of graduate health students in global health activities.
 - Shailey Prasad and Jessica Evert
 - Questions: What are learning goals for graduate health students in participating in short-term activities?
 - How can schools promote exchanges and mutuality with students in host countries?
- Best preparation and debriefing for students and faculty.
 - Sarah Stanlick and Eric Hartman
 - Questions: Can humility be taught?
 - What are the best ways to prepare students?
 - How can a lasting benefit be maximized?
- Administrative structures for ensuring best practices.
 - Kim Nimmo and Cheryl Matherly
 - Questions: How does one change institutional culture?
 - Where are the obstacles in the institution to promoting change? How can these be addressed effectively?
 - How can we ensure that administrative structures promote responsible student learning?

Session Five. “Strategies for taking lessons home and moving forward”

Dr. Cheryl Matherly, Lehigh University Vice President and Vice Provost for International Affairs, reviewed the prevalence of students working and studying abroad, with 2016 data showing 350,000 students doing so, most of them for credit and for short periods of time. She described the many challenges faced by institutions seeking to make these programs worthwhile and responsible: Decentralization of administration of international, service, and health professions programs; Service organizations with loose affiliation with the institution; Lack of coordination of information about programs; Setting appropriate student expectations for experiences abroad; Adequacy of orientation programs, especially for service programs; Adequacy of training for campus risk management team; Faculty or program directors without understanding of standards in the field; Program funds raised/generated prior to program approval; Lack of clarity as to who gets to say ‘no’; Institutional practices reinforcing participation in problematic programs; Using information from program evaluations for debriefing. What is needed is clear communication between international affairs, service, and health professions, clarity of learning outcomes for programs abroad, engagement of student leaders, clear standards for ‘go’ and ‘no go’ activities, review of campus business procedures, and training for individuals who direct key business operations

Thematic forum outcomes

The forum successfully raised awareness with a diverse audience about the potential for exploitive and harmful impacts on host communities and volunteers with poorly designed global health programs. We also highlighted research related to the outcomes from global health programs and presented programs that demonstrated effective and responsible models for global health, service learning, volunteerism, and assessment. We introduced the standards of good practice that are being developed by the Coalition for Responsible Short-Term Experiences in Global Health (CoRSTEGH), an alliance of academic and health professionals engaged with global health volunteerism. The forum format encouraged networking among individuals who are involved directly and indirectly with global health programs. The forum reinforced the need for continued work related to standards of good practice, to be continued by CoRSTEGH in collaboration with partners across the spectrum of short-term global health activities. Lasker and Matherly are preparing an AIEA issues brief, examining issues with global health volunteerism, introducing the work of CoRSTEGH, and examining implications for university leadership.

Lessons learned or insights for Senior International Officers

The issues identified in this forum should be of concern for SIOs. Short-term programs are among the fastest growing programs in study abroad – the most recent Open Doors report indicates 65% of students who study abroad do so on programs that are six weeks or less. At the same time, the number of students participating in non-credit volunteer/service programs is reported at about 23,000, a number that is assumed to underreport actual participation since many students seek these experience without university support. This is a growth area, and as discussed in the forum, many organizations are responding to market demand. While there are many organizations that are providing responsible programming, the demand for international volunteer experiences and lack of clear standards of practice contribute to an environment in which exploitative programs can continue to operate. The leadership for global health volunteerism is often located with colleges of health, and SIOs may not be aware of the scope of exploitative practices, especially how institutional practices may unintentionally reward or reinforce unethical activities. For example, we discussed how some organizations market their programs as ways that high school students can enhance their college applications. Universities have a particular responsibility to be leaders for responsible practice, and as this forum underscored, SIOs, with responsibility for internationalization strategy, can play an essential role.







