Voices from the Field Interviews with Global Health Pathology Volunteers

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KEYWORDS

- Short-term medical mission
 Volunteer
 Pathology
 Clinical laboratory
- Low-resource setting

KEY POINTS

- Most of the respondents were later in their life and careers. However, this trend may be due to the authors' selection bias.
- The primary motivation for involvement was personal reasons. Participation was largely via nongovernmental organizations, and volunteers stay in mission for many years.
- · Most of the volunteer work was privately funded.
- The respondents' work resulted in peer-reviewed publications, abstracts, newsletters, and talks in grand rounds and meetings.

It is important to share the experiences of individuals who have been involved in volunteerism in pathology as a way to illuminate the *who*, *why*, and *how* of this uncommon experience. Medical missions, defined as "grass root, direct, medical service aid from wealthier countries to low and middle income countries, 1" are an important part of how health care is provided in much of the world. One of the strongest structural drivers of the need for medical missions is the care gap between high-income and middle-income countries. The places in the world with the highest disease burdens are largely economically disadvantaged and also have the fewest physicians per capita. However, there are many other drivers of missioning, including goodwill, interest in novel

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cultures or disease states, an opportunity to educate, and so forth.^{3–5} This care gap as well as the desire to help is not unique to any one specialty, but there is relatively very little written about volunteer work in pathology.

A review of the literature about medical missions shows that most (>80%) articles about medical missions are focused on surgical and then internal medicine interventions. The largest survey to date of physicians involved in short-term medical missions shows the same surgical focus. As a first step in closing the knowledge gap on pathology volunteering, the authors present narratives of a few pathologists who have participated in these missions as well as a brief overview of the work of Pathologists Overseas. Pathologists Overseas, founded in 1991 by Heinz Hoenecke, is the largest volunteer organization specifically focused on anatomic and clinical pathology. The article begins with a brief summary of the individual narratives grouped under the headings who, why, and how. The article closes with the full detailed narratives.

WHO

The profile that begins to emerge is both similar and different from that of medical volunteerism as a whole in key ways. In terms of similarities, the authors' respondents tend to be later in their careers and life spans. This finding is in keeping with previous studies that show that many volunteers who participate in short-term medical missions (STMMs) are at or close to the end of their formal working lives and are child free. ^{7,8} In addition, the involvement of those the authors interviewed tended to be long-term rather than short-term, also in keeping with trends seen in other studies of medical missions. A demographic profile of physicians captured from an online survey shows that 77% of participants in STMMs had participated in more than one trip. ⁵ In terms of differences, the experiences of the authors' cohort of respondents were more focused on capacity building rather than restricted to direct patient care. This finding is probably a characteristic of the work requirements of pathology itself, especially clinical pathology/laboratory medicine whereby samples have relatively short viability windows.

WHY

The motivations for the respondents varied widely but were largely personal, for example, new endeavors with a spouse after retirement, taking a year off during medical school, learning from a friend about a need in a foreign country, and so forth. This finding is in keeping with findings in other work exploring motivations for STMMs. Professional, demographic, and socioeconomic determinants seemed to be less of a motivator than personality and word-of-mouth recruitment by friends.³

HOW

How did the authors' interviewees get involved in medical missions? What was the length of their involvement? How was this involvement funded? Involvement in volunteering was largely through nongovernmental organizations (NGOs). Two of the 6 interviewees transitioned to working at least semi-independently afterward, but the introductory mechanism was an NGO. An NGO provides a mechanism for volunteering when there is not yet an established relationship between individuals or institutions and the sending and recipient countries. However, this can also be a bottle neck when the available NGOs are not well matched to the skills or interests of volunteers. For example, there are NGOs devoted to specific types of surgery (cleft palate, urology, and so forth), and this encourages the participation of volunteers with those skill

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