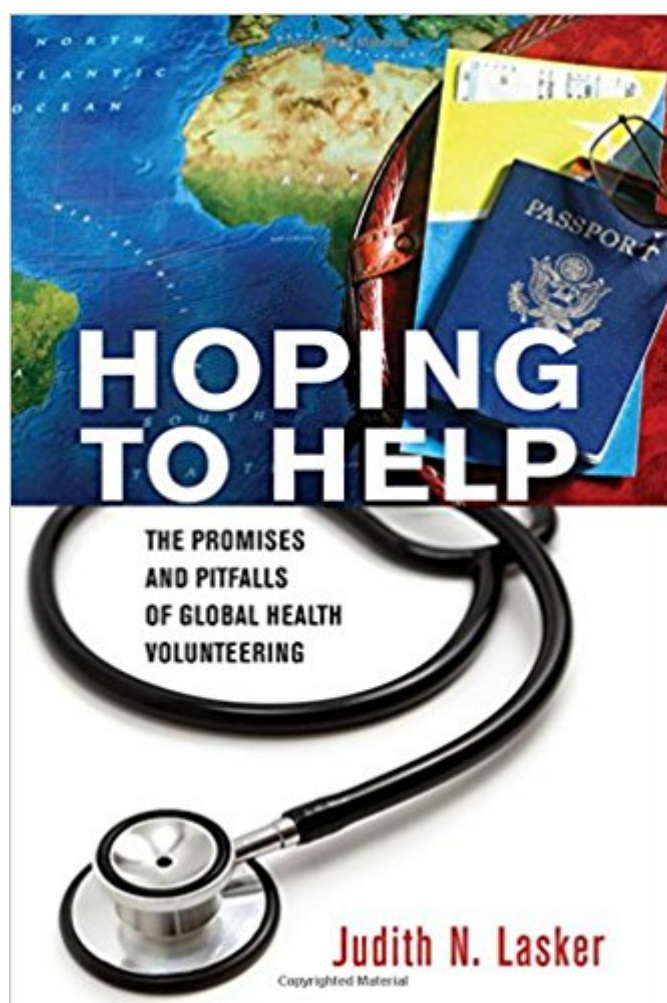


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Hoping To Help: The Promises And Pitfalls Of Global Health Volunteering (The Culture And Politics Of Health Care Work)



Synopsis

Overseas volunteering has exploded in numbers and interest in the last couple of decades. Every year, hundreds of thousands of people travel from wealthier to poorer countries to participate in short-term volunteer programs focused on health services. Churches, universities, nonprofit service organizations, profit-making "voluntourism" companies, hospitals, and large corporations all sponsor brief missions. *Hoping to Help* is the first book to offer a comprehensive assessment of global health volunteering, based on research into how it currently operates, its benefits and drawbacks, and how it might be organized to contribute most effectively. Given the enormous human and economic investment in these activities, it is essential to know more about them and to understand the advantages and disadvantages for host communities. Most people assume that poor communities benefit from the goodwill and skills of the volunteers. Volunteer trips are widely advertised as a means to "give back" and "make a difference." In contrast, some claim that health volunteering is a new form of colonialism, designed to benefit the volunteers more than the host communities. Others focus on unethical practices and potential harm to the presumed "beneficiaries." Judith N. Lasker evaluates these opposing positions and relies on extensive research—interviews with host country staff members, sponsor organization leaders, and volunteers, a national survey of sponsors, and participant observation—to identify best and worst practices. She adds to the debate a focus on the benefits to the sponsoring organizations, benefits that can contribute to practices that are inconsistent with what host country staff identify as most likely to be useful for them and even with what may enhance the experience for volunteers. *Hoping to Help* illuminates the activities and goals of sponsoring organizations and compares dominant practices to the preferences of host country staff and to nine principles for most effective volunteer trips.

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Customer Reviews

"Many scholars have discussed the theory behind global aid and the various perils in its execution. Dr. Lasker, a professor at Lehigh University, delivers instead a straightforward, data-driven review of a small health-related fraction of the enterprise, aiming to answer a few basic questions: 'Do volunteers help or hurt?' she asks. 'In what ways?' It turns out these questions cannot be answered, at least not very precisely. Still, anyone contemplating a volunteer stint is likely to be interested in Dr. Lasker's results, which amount to a sort of de facto best-practices manual." — Abigail Zuger, M.D., The New York Times (April 25, 2016) "This book is highly relevant to all healthcare professionals, particularly students considering an elective overseas, or dental professionals thinking about using a couple of weeks of annual leave to 'help others' abroad. . . . The publication is a triumph of social analysis and commentary, which rigorously appraises and summarises the existing body of evidence on the topic. . . . overall it is a deeply compelling read that will give you plenty of food for thought, and perhaps change your plans, practice or even your life. I would wholeheartedly recommend it." — A. E. Jones, British Dental Journal (August 12, 2016) "The space where international health volunteering and good intentions collide can get very messy. Hoping to Help cleans up the mess. This book should be required reading for anyone interested in volunteering abroad in any capacity, health service or otherwise." — Brandon Blache-Cohen, Executive Director, Amizade Global Service-Learning "Hoping to Help makes a clear and new contribution. The issues Judith N. Lasker examines are increasingly pressing for universities across the United States, as the trend toward internationalization is accompanied by unexpected perverse incentives and adverse impacts such as those Lasker raises. This high-quality book will appeal beyond the global health community to study abroad, service learning, and civic engagement programs, as well as church organizations and civic groups." — Eric Hartman, Kansas State University "Hoping to Help has many important implications for potential international volunteers as well as universities, nongovernmental organizations, and religious organizations in particular." — Benjamin Lough, University of Illinois at Urbana-Champaign "Hoping to Help is an important read for anyone interested in global health or participating in a global health

experience. Judith N. Lasker does an excellent job of framing the issues tied to global volunteering into a larger historical context that adds a deeper understanding as to how we have evolved to the situation we have today. She looks at the issue from many stakeholder perspectives, including, most important, that of the host community." — Tricia Todd, MPH, University of Minnesota

Judith N. Lasker is N.E.H. Distinguished Professor of Sociology at Lehigh University. She is coauthor of *When Pregnancy Fails*, *In Search of Parenthood*, and *Equal Time, Equal Value*.

I really enjoyed reading this book. Dr. Lasker has done a masterful job of coming up with a wealth of references and communicates her message with remarkable clarity. This makes for a very engaging read. I strongly recommend this book for anybody involved in planning global health volunteer activities. I particularly suggest the important caution that the author poses to us in mentioning the pitfalls of global health volunteering. This is also a good book to suggest to energetic students who want to "do good" in the world.

I loved the book and the characters. *Fortunes Neck* captures a period of time and offers a cast of characters that could be described as ordinary New England folk — yet the simplicity and plain spoken dialogue draws the reader in to a world that is both ordinary and profound. I loved the characters and the window into their worlds that the author provided. Sometimes I laughed out loud and sometimes I found myself nodding in agreement thinking he hit the nail on the head there. Mr. McDermott's voice, his characters, and his story draw you in and at the end I found I was reluctant to leave such company. Looking forward to his next story!

helpful though limited research comparing mission organizations and mission trips - long term/short term; one time and regularly scheduled; volunteer and paid; specialized/skilled and non skilled persons. Examines who these trips are really for and how to possibly increase effectiveness of all who are thinking about going, and even those who have been, before going again.

Superbly balanced. Missions will be essential for many years to come, but should be done better, and should be regulated as far as possible

Very good book. Important, understudied topic.

Following the huge earthquake in Haiti I was interested in volunteering to go there as an aid worker for up to a month. I'm not a nurse but was willing to do anything required. However I learnt that I would have to provide some thousands of euro to the NGO taking volunteers. This was explained by saying that it would cover flights, accommodation, food and travel insurance. But I didn't have money to give, especially if I would not be earning for that period. I'm self-employed. To me it seemed that I could give my money or my time but not both. Then a cholera outbreak (brought by Nepalese troops it turned out) meant that no aid workers were allowed to go, so I contributed a story to a charity anthology instead.

Aid volunteering, especially in the area of healthcare which is the subject of this book, is a growth industry. Judith Lasker tells us that over a million people went abroad from America during 2007. Having read 'Disaster Capitalism' by Anthony Loewenstein I read her book following the money as much as anything. Sure enough, Judith who researched Haiti, Ghana, Ecuador and Niger, found that first-world governments have been soured towards handing aid to possibly corrupt nations and dictators, preferring to sponsor NGOs (non government organisations) or hand contracts to private companies. But if the countries dealt with the corruption they would be able to afford a health service, so essentially the outside aid was prolonging the corruption. Some long-established NGOs are seen as slow-moving and cumbrous, so individuals or small groups self-organise. While she managed to get a charity staffer to tell her that volunteer youth workers were not expected to do a good job - the purpose of their trip was to pay the charity and to be tapped for money again and again. With little training, students and office workers on vacation will have a varied experience, Judith found, as they may not speak the local language or understand customs, while facilities will be basic; even water restrictions and cockroaches can spoil the trip for some. Young people would be only asked to do basic work in most cases, but these poor countries are not short of manual labour so they were taking a local person's job. Students often wanted to put aid work on their CV, but colleges, says Judith, had wised up to the fact that mostly rich kids could afford to go. Nurse trainees were concerned that if they were not licensed to carry out procedures in America, how come they were expected to do them abroad? A charity set up to focus on eye care or fistula repair, say, might do no other work, arrive, see only those who were in the area and depart. A much better way of operating was when they scheduled a trip to work with a mobile clinic and villagers were let know in advance that they would be coming. Volunteers who came prepared to do anything asked of them were valuable but those who were fussy and kept distracting the permanent workers were a nuisance. The best contribution Judith found was when a small team, a surgeon and wife, went out every year to carry out spinal operations and train the

local doctors. Some groups were run by missionaries and one lady told a conference that the work was about prayer first, aid second. I'm sure that's very helpful to people with parasites or polio - sorry. A doctor actually learned from a local that the insistence on a prayer session before the clinic opened was driving people away. The doctor quietly dropped the prayers and got on with the medical aid. There isn't space to do justice to this fascinating and honestly written book, which contains well analysed feedback from aid workers both permanent and voluntary, and from Judith's own experience - on a trip to Haiti, two of the aid workers were solely there to prepare PR materials for the NGO. Read it and be inspired or cautioned, or both. This book will interest anyone in the medical field, or a aid donor, a charity worker, or a person thinking of going abroad as an individual.

The Red Cross has repeatedly been criticized for sloppy blood-work and questionable fund-raising. I've also always been a bit suspicious of them sending volunteers around the country/world to help out, adding to the disaster-area housing and food demands, while contributing limited value (after transportation costs) and questionable talents that probably could be easily acquired/trained within the area. 'Hoping to Help' provided an objective opportunity to examine that thesis. Turns out that just international volunteer activities originating in the U.S. totaled about 162 million hours in 2007. (about 1 million American volunteers), with about 200 thousand of those in the healthcare area. About half the money spent on international volunteering goes to airlines and much of the rest pays for the cost of administration and supplies provided in the U.S. The vast majority of volunteer trips last two weeks or less; almost none of the groups have counterparts in the disaster area with whom to coordinate, or evaluate the impact of their presence. Somalian blogger Ossob Mohamud wrote 'Voluntourism almost always involves a group of idealistic and privileged travelers who have vastly different socio-economic statuses vs. those they serve. . . . The developing world has become a playground for the redemption of privileged souls looking to atone for global injustices by escaping the vacuity of modernity and globalization.' Looks like not all those in recipient areas are impressed either. Privatization of health services, partly required by the World Bank and IMF in response to mounting foreign debt) have brought a sharp decline in public services. At the same time, poor countries have experienced a sharp increase in chronic ailments that require ongoing medical attention often unavailable. Mass media and celebrities have helped fuel the increase in volunteering, and in some cases the goal of governments in supporting volunteering is to provide an alternative to military service. Many cruise lines offer one-day service opportunities as excursions in the countries they visit. Some do it to get into medical school.

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