Chapter 19 International Healthcare Experiences: Caring While Learning and Learning While Caring

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ABSTRACT

International Healthcare Experiences (IHEs) provide opportunities for students to experience healthcare in unfamiliar and sometimes challenging settings. Types of IHEs include acute care, ambulatory care, and medical missions. Students have reported multiple benefits through completion of IHEs including increased personal and professional development, increased cultural sensitivity, and increased self-awareness and self-confidence. While many benefits have been noted, there are also challenges in developing, implementing, and sustaining IHEs including financial considerations, safety concerns, and apprehensions regarding the impact the IHE is having on foreign patients and healthcare workers. Additionally, the possibility of limited sustainability of an IHE must be taken into account when evaluating its development and overall impact. This chapter's aim is to summarize the currently available literature on IHEs and to provide subjective reflections from international colleagues and students associated with IHEs connected to the authors' institutions.

DOI: 10.4018/978-1-5225-0169-5.ch019

INTRODUCTION

Interest in global health among health professions students has increased considerably over the past two decades. It was relatively rare for United States (US) students to study overseas until the 1960s (Bruno & Imperato, 2015). The explosion of new technology and travel modalities over the last few decades, however, has made it considerably easier to communicate and interact with people in places that were previously unreachable. Fortunately, there are growing opportunities for students in the health professions to study or train abroad. This chapter focuses on International Healthcare Experiences (IHEs) for such students from a US perspective due to the authors' involvement with multiple US-based healthcare programs.

Background

The oft-quoted mantra of 'think globally, act locally' is becoming more pertinent with the continued development and implementation of IHEs (McKimm & McLean, 2011; Mutchnick, Moyer, & Stern, 2003). In response to increased student demand, schools in the health professions appear to be increasing their global content and IHE offerings (Audus et al., 2010; Drain et al., 2007; Kelleher, 2013). In 2008, it was reported that 87% of US medical schools offered IHEs and as of 2012, more than 30% of medical school graduates had completed an IHE (Ackerman, 2010; Hampton et al., 2014). In fact, students may select which school to attend after an evaluation of available international opportunities (Drain et al., 2007; McKinley, Williams, Norcini, & Anderson, 2008). It is becoming progressively more important to develop culturally sensitive practitioners to improve the well-being of patients, regardless of where students finally practice (McKimm & McLean, 2011).

Current trends in study abroad or global experience programs for US students have displayed an overall decline in Western European countries while the demand for programs in Asian or Southern hemisphere countries has increased (Rhodes, DeRomana, & Ebner, 2014). Interest in serving underserved populations has been shown to increase after IHE participation and the shift to more developing and underserved countries may be partially explained by students' desire to positively impact communities and residents that may have limited access to appropriate medical care (Ackerman, 2010; Chin-Quee, White, Leeds, MacLeod, & Master, 2011).

IHEs typically range from a few days to a year and can differ substantially from one another (Crump, Sugarman, & WEIGHT, 2010). IHEs are normally administered by US colleges or universities, or by a contracted partner (Rhodes et al., 2014). Additionally, programs including 'Operation Smile', 'Operation Giving Back' and other philanthropic organizations provide students with an opportunity to participate in IHEs outside the curriculum of their professional program (Guzman & Schecter, 2008). Regardless of the type of IHE completed, it can enhance student learning in ways that are impossible to attain through the classroom setting (Hampton et al., 2014).

Colleges and universities have long been involved with global experiences. It would be difficult for an institution of higher learning to be successful if it only considered the local environment. Global engagement has become a common feature in academic strategic plans and entire courses focusing on global health are now being described in the literature (Addo-Atuah, Dutta, & Kovera, 2014; Drain et al., 2007; Owen et al., 2013; Schellhase, Miller, Ogallo, & Pastakia, 2013). Institutions seek the brightest faculty and staff from all over the world as school reputation and prestige may benefit from global engagement. Working with global partners can facilitate considerable opportunities for scholarship and

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