

## BEST PRACTICES FOR SHORT-TERM HEALTHCARE MISSIONS

Question: How should short term healthcare mission teams handle the issue of safety?

Participants in discussion	Background (perspective)
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Why is this important? The safety of short term healthcare mission team members is the responsibility of the team leader, partner, and church leaders.

### CONSENSUS STATEMENTS

#### Best

1. Check with governmental agencies to determine which parts of the world pose a greater than average risk for a short-term healthcare missions team.
2. Check with governmental agencies to determine how best to decrease the risk of team illness during the short-term mission trip
3. Adapt the selected location of service and team preparation so that one is taking less risk.

#### Better

1. If a team is going into a higher risk situation, then the sending organization has a responsibility to insure that the team participant:
  - a. Has a will that is in force
  - b. Has malpractice insurance coverage
  - c. Has medical and political evacuation insurance
  - d. Has all vaccines and prophylactic medications
  - e. Has the approval (in writing) of the sending organization for a high risk trip
  - f. Has the approval of their family (in writing) to participate in a high risk trip
  - g. Has signed a release of liability
  - h. Has spoken with their pastor regarding their service in a high risk area.

#### Good

1. Avoid places in which there is a high level of violence and threats against Christians

### Biblical concepts involved

*Serving in life's tough and gritty places*

## Luke 10: 25-37

**25** On one occasion an expert in the law stood up to test Jesus. "Teacher," he asked, "what must I do to inherit eternal life?" **26** "What is written in the Law?" he replied. "How do you read it?" **27** He answered: " 'Love the Lord your God with all your heart and with all your soul and with all your strength and with all your mind'<sup>[c]</sup>; and, 'Love your neighbor as yourself.'<sup>[d]</sup>" **28** "You have answered correctly," Jesus replied. "Do this and you will live." **29** But he wanted to justify himself, so he asked Jesus, "And who is my neighbor?" **30** In reply Jesus said: "A man was going down from Jerusalem to Jericho, when he fell into the hands of robbers. They stripped him of his clothes, beat him and went away, leaving him half dead. **31** A priest happened to be going down the same road, and when he saw the man, he passed by on the other side. **32** So too, a Levite, when he came to the place and saw him, passed by on the other side. **33** But a Samaritan, as he traveled, came where the man was; and when he saw him, he took pity on him. **34** He went to him and bandaged his wounds, pouring on oil and wine. Then he put the man on his own donkey, took him to an inn and took care of him. **35** The next day he took out two silver coins<sup>[e]</sup> and gave them to the innkeeper. 'Look after him,' he said, 'and when I return, I will reimburse you for any extra expense you may have.' **36** "Which of these three do you think was a neighbor to the man who fell into the hands of robbers?" **37** The expert in the law replied, "The one who had mercy on him." Jesus told him, "Go and do likewise."

### ***We are safe in the Lord***

#### [Psalm 4:8](#)

I will lie down and sleep in peace, for you alone, O LORD, make me dwell in **safety**.

#### [John 17:12](#)

While I was with them, I protected them and kept them **safe** by that name you gave me. None has been lost except the one doomed to destruction so that Scripture would be fulfilled.

#### [2 Timothy 4:18](#)

The Lord will rescue me from every evil attack and will bring me **safely** to his heavenly kingdom. To him be glory for ever and ever. Amen.

### ***Eschatologic views***

#### [Psalm 46:9](#)

He makes **wars** cease to the ends of the earth; he breaks the bow and shatters the spear, he burns the shields with fire.

#### [Ezekiel 34:25](#)

" I will make a covenant of peace with them and rid the land of wild beasts so that they may live in the desert and sleep in the forests in **safety**.

### Hosea 2:18

In that day I will make a covenant for them with the beasts of the field and the birds of the air and the creatures that move along the ground. Bow and sword and battle I will abolish from the land, so that all may lie down in **safety**.

### **Wisdom and discretion**

#### Proverbs 2:11-13

**11** Discretion will protect you, and understanding will guard you. **12** Wisdom will save you from the ways of wicked men, from men whose words are perverse, **13** who leave the straight paths to walk in dark ways,

#### Proverbs 4:14-16

**14** Do not set foot on the path of the wicked or walk in the way of evil men. **15** Avoid it, do not travel on it; turn from it and go on your way. **16** For they cannot sleep till they do evil; they are robbed of slumber till they make someone fall.

### **Adventure travel is increasingly popular**

Short term missions represent a means by which an uninvolved church member can be transformed into a “dangerous” disciple for Christ. The short-term team member can experience a life changing time in service to others and begin a process of reflection and reassignment of personal values and goals.

Vacations are thought to be good for one’s health<sup>1</sup>. Yet, in the Western world, people are willing to accept greater risks in order to get the thrills that make a once in a life-time memory.

*There's always been a fine line between taking a calculated risk and foolishly gambling with your life. At a time when more tourists are coming home in caskets, that line is becoming increasingly faint.<sup>2</sup>*

### **Example (A scary situation):**

The e-mail from my resident on her international medical missions rotation seemed to immediately take me into the small medical clinic in Sudan.

*i am writing quickly. lots of gunshot wounds coming in. commissioner of southern sudan province yesterday allowed casualties from fighting to come to our hospital since we are here .. we worked until 11 pm last night, all day, all night. bad injuries we got word this morning about unrest in Kenya. it is not safe in Nairobi right now to go back there. we are going to speak tonight and pray about if we need to land in some other country (ethiopia) or go to kartoum. please pray for our team. we are scared because it is not safe here really and violence is starting again in Kenya and our kenya team got word from Kenya not to plan to go to Nairobi today. businesses are not opening and people are staying inside. please have (.....contact their kenya missionaries to see if it is safe to do mission. all may change by Saturday but they should be aware of unrest right now.*

If this note were from a short-term healthcare mission team imagine how your church leaders/sending organization would respond to this e-mail.

Each time when we leave our homes and churches we know that we may not return. Although the mortality rate in long term American missionaries is lower than their in-country cohort<sup>3</sup>, we need to be aware of the risks that we are taking independently and corporately when engaging in a short-term healthcare mission trip. Good choices and planning can increase the odds of returning home. The risks we take in traveling to high risk areas can be under appreciated especially when we travel in groups.

*People sometimes do not recognize the difference between being brave and being stupid.*

*Take the deaths of seven Spanish tourists last summer at the hands of a suspected al Qaeda suicide bomber. The horrific incident happened in a part of central Yemen known for its lawlessness, where about 100 foreigners have been kidnapped since the 1990s. What were these visitors doing there in the first place?*

*Believing perhaps that the terrorists had called it a day, two Belgians vacationed in Yemen earlier this year. But they were wrong. When suspected al Qaeda gunmen opened fire in Sanaa, they were among four people killed.<sup>2</sup>*

### **Christian views regarding personal safety**

It is clear that we do not live in a safe world. Just watching ten minutes of the evening news convinces even the most ardent optimist that there is a lot of violence in the world.

As Christians we can find three competing threads in the Bible which influence our wiliness to accept risk in healthcare missions. We are called to serve in the challenging places where it may not be safe – look at the story of the Good Samaritan. The man had been beaten and left for dead by robbers. This scene rarely occurs in my home town in the more dangerous areas, and yet, we are called to serve there.

When we serve our master Jesus, we know that our lives belong to him and are completely safe in His hands. our life is in Christ Jesus and as such we are safe in him (Psalms 4:8, John 7:12, and 1 Thessalonians 5:22). Since we are with the Lord whether we are here in this body or on the other side of the grave, fear should have no place in the Christian life. Romans 8:15 says: "For you did not receive a spirit that makes you a slave again to fear, but you received the Spirit of sonship. And by him we cry, "Abba, Father." This can translate into a sense of fearlessness and even invulnerability when doing what the Lord's work,

even when the situation is not safe. If we look at the situation from a heavenly viewpoint, martyred healthcare mission worker can be viewed as giving his/her life for Jesus and for the people who have not heard the Gospel. There are number of situations where martyred Christians have impacted a people group for Christ in a dramatic way - when the people group was not influenced while the missionaries were alive (Dr David Thompson's parents in Vietnam).

The other Biblical thread is that of God's wisdom, which helps the Christian capable of making reasoned and wise decisions. Proverbs 2:11-12 says, "Discretion will protect you, and understanding will guard you. Wisdom will save you from the ways of wicked men...". We are to seek God's wisdom in assessing risk and selecting places to serve.

It may be reasonable to decide where to go based on several criteria:

1. Will the team be working with another Christian partner who provides healthcare?
  - a. This is important because there will likely be resources for people who get ill and local teams are more aware of the areas with greater risks.
2. Where can the team make the most impact?
  - a. Sometimes sites are chosen because they are exotic or interesting. Moreover, some leaders think of the good that they could do in these sites without thinking of issues of follow-up and support.
  - b. It might be great to go to some creative access countries, but if you are forbidden to talk about Jesus, how will your group handle this potentially deal-busting limitation?
3. Do we have the team members with skills needed to make a long-lasting impact?
  - a. If you have a group of college pre-med students, then your site selection should be different than if you have seasoned neonatal nurses.
4. Are the logistics reasonable?
  - a. You can go to Timbuktu, but it is difficult in the summer!
5. Do we envision a long-term partnership?
  - a. If the answer is "no" it might be better to select another site
6. Are there significant risks of team members acquiring a life threatening illness?
7. What is the relative benefit to risk ratio?
  - a. From our point of view
  - b. From God's point of view.

Example: A few years ago, our healthcare mission team had the opportunity to serve in a remote Muslim area in sub-Saharan Africa. Our partner was a pastor who had a single nurse in a small clinic. We could see that the needs were great, but the risk was relatively high. This was an area in which Christians were heavily persecuted and outsiders were frequently harassed. There was even a possibility

of being taken hostage. On the other hand, we had the opportunity to work in a reasonably safe area in an Asian creative access country. The site had

1. An experienced partner with about 20 other healthcare professionals (physicians, nurses, dentists, psychologists).
2. Many different venues for serving
  - a. Clinics
  - b. Community Hospitals
  - c. Tertiary Hospital in a large city
  - d. Surgical options
  - e. Field work conducting surveys
  - f. Teaching village doctors
  - g. Work with disabled children and young adults
  - h. Psychiatry work
3. We had access to community physicians, surgeons, nurses, psychologists
4. Sharing Jesus one-on-one is allowed.
5. Travel to the site was fairly easy and reasonably priced
6. We wanted to have a long-term partnership with this NGO
7. There were few health risks.
8. High benefit:Low risk. Because we were a new group, we decided that it would be better to start with the safer/easier site.

The major risks associated with travel<sup>3</sup> are:

1. Vaccine-preventable diseases
2. Insect-borne diseases
3. Gastrointestinal illnesses, such as diarrhea, which is caused by contaminated food and water
4. Accidents

There are active war zones in regions of the world (6/2008) including: Iraq, Lebanon, Sudan, Chad, Somalia, Afghanistan, Côte d'Ivoire, Pakistan, Sri Lanka and Burundi. Neither Liberia nor Haiti is listed as a war zone, but rampant criminality make these countries more dangerous for travelers. There are also regions where homicide is more prevalent. Some countries within these regions have higher rates of homicide. Serious deliberation should be initiated should any short term healthcare mission team that wants to serve in these war torn areas.

***If you decide to take a short-term healthcare mission team to a war-torn or dangerous area***

World Vision has a book which is an excellent personal safety guide for travel in another country.

There are some things that you can do to decrease your risk in higher risk countries. International companies hire personal protection from companies including Triple Canopy, Blackwater USA and DynCorp International when

traveling to war-torn and dangerous parts of the world. Clearly this type of protection can cost more than most Christian mission organizations can afford.

There are other tips which can decrease your risks. Working with a competent local partner can be a tremendous advantage. Talking with one's partner to determine the most appropriate location and timing of service is reasonable. In some countries, just working with a short-term healthcare mission group places the partner at risk for persecution and retribution from governmental officials and the police. Therefore, be certain to talk with your partner regarding how communication should be conducted. In some countries talking about "missionaries" or the "Gospel message" or evangelism in communications can create risk for your partner. In some situations even telling someone in country about your partner's ministry/mission work can put them at grave danger. Christian mission partners have been jailed or asked to leave the country.

Prayer, devotions and time spent with God and tuning in to the Holy Spirit can help to identify areas of concern generally or during times when problems occur. Ask for discernment and wisdom to know best how to deal with situations

Preparing a team to live more like the people that they serve can be very helpful. Avoiding tourist locations where Westerners "hang-out" and expensive "five star" hotels may be helpful. Traveling with a large group of frequently loud/noisy Americans can attract a lot of attention. Consider traveling with a smaller group, or even two or more small groups. Team members should not be out in public alone, especially at night. Team members should travel in groups of two or more. Making efforts to limit loud talking and laughing in public places can help blend-in in many cultures. Dressing in clothing that is more appropriate to the region can also make a group less obvious.

*... varying your daily route so that potential attackers can't predict when you'll be in particular place, dispensing with obvious signs of wealth and if possible traveling in a group. Control Risks provides a list of general advice that includes suggestions such as memorizing important local phrases and avoiding alcohol intake, which, no surprise, tends to make people more vulnerable to attack.<sup>4</sup>*

Service in rural areas places the team in a position of being more exposed should hostilities begin. Consideration should be given to developing a reasonable plan to travel to safer areas should trouble erupt.

Contacting the appropriate home country embassy to let them know that you are in country and to provide them with contact information can make it easier for them to locate you should the situation deteriorate.

Sender  
Before

Senders should have a due-diligence role which should include determining the relative risk that the team is taking, whether the preparations are adequate and if the church/sending organization has signed-off on the risk. The sending organization has a responsibility to insure that the team participant:

- a. Has a will that is in force
- b. Has malpractice insurance coverage
- c. Has medical and political evacuation insurance
- d. Has all vaccines and prophylactic medications
- e. Has the approval (in writing) of the sending organization for a high risk trip
- f. Has the approval of their family (in writing) to participate in a high risk trip
- g. Has signed a release of liability
- h. Has spoken with their pastor regarding their service in a high risk area.

The sending organization may find it appropriate to determine in advance what steps should be taken in response to a number of situations including:

- a. How will the team handle a team member who is seriously injured or who has a life-threatening illness.
- b. How will the team handle the death of team member.
- c. What should be done if a mission partner is seriously injured, killed or persecuted.

Clearly these steps take work and preparation. Sometimes the work of a short term healthcare trip can seem overwhelming so it may seem easier to delay the work so that it is dealt with when and if a problem develops. However, dealing with these types of problems late, when they occur is likely to create a crisis-like situation.

### *During*

Prayer teams should be praying for the team daily. Close contact with the team leader is indicated when operating in dangerous situations. Daily phone or e-mail contact is preferable.

### *After*

A debriefing at an appropriate time is appropriate. If everything went well it is good to review and share the lessons with other short-term mission trip leaders.

### *Goer*

#### *Before*

There is frequently a great deal of pressure on the team leaders to determine where to serve. This is especially true when there are disaster situations where there is a genuine desire and capability to help. Yet, we all deal with limited resources. We do not have the capacity to serve all people in need; thus, we have to choose. Seek the input from your sending organization before



making any decision. It may be appropriate to review the criteria for serving in a location:

1. Will the team be working with another Christian partner who provides healthcare?
2. Where can the team make the most impact?
3. Do we have the team members with skills needed to make a long-lasting impact?
4. Are the logistics reasonable?
5. Do we envision a long-term partnership?
6. Are there significant risks of team members acquiring a life threatening illness?
7. What is the relative benefit to risk ratio?

Make sure that all of the team members have received appropriate vaccinations prior to travel. Discuss issues of prophylaxis including mosquito netting if appropriate. Create a team medication box which is to travel with the team. The medication box should contain treatment for common ailments and those illnesses unique to the area.

#### *During*

The team leader should make every reasonable effort to keep his/her team spiritually, emotionally and physically safe. Daily discussion with one's partner and sending organization regarding the evolving risks and situations are appropriate. Team members should feel free to share their concerns with the team leader. The team leader should make sure that the team is receiving appropriate prophylactic medications as appropriate.

#### *After*

If a team leader has handled the situation well there should be time set aside to share the experiences of the leader with other leaders. If things did not go well – the senders were unaware that there was risk associated with the team trip, a team member illness is handled poorly, etc, then this can be a learning experience for the team leader. Some team leaders may remove themselves from service after such an event. In rare situations if the leader made reckless choices – deciding on the field to add in a trip to a near by war zone, for example, then it may be necessary for the sending organization to remove the leader from service for a period of brokenness at the feet of Jesus prior to being used again.

## References

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4. Eaves, E. Most Dangerous Destinations 2007. in *Forbes* (Forbes, 2007).