Preparing for International Experiences: A Practical Resource Guide

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When it comes to global health, there is no ‘them’… only ‘us.’”
– Global Health Council
Letter from the Editor

Dear IHD Members,

With WCPT Congress and CPA Congress behind us, we look forward to the latter half of this year and to using all the knowledge we gained from these professional experiences. During this time of year many students and clinicians are preparing to complete student electives and international experiences overseas. It can be a daunting task, especially if one has never been abroad to work or volunteer, and the planning stages can be overwhelming.

The goal of this edition of Dispatches is to simplify the to-do-list and to help clarify the process from start to finish. We want you to move forward being equipped and as prepared as possible to be successful with your experience. We hope to have created a practical and useful resource for all of you who may one day volunteer overseas.

This edition of Dispatches features advice from the exec, a how-to checklist to help you organize, personal anecdotes from well-travelled therapists, a number of links and reading material to help you prepare, and more. Be sure to check out the featured NGO International Health Initiatives which has a lot of great information in their interview and on their website.

We also seek to create an ongoing dialogue among our readership. Respond to the discussion question posed in the new section “Your Voice” and your thoughts may be published in the next edition.

We aim to publish a newsletter that is informative, relevant and useful to you. What would you like to see in Dispatches? As always, we welcome your feedback and input, especially about this new online format. Please feel free to contact me with your comments, with suggestions for future themes, or if you would like to contribute by writing an article, reviewing literature, writing a profile for a country you have visited, or be featured in an interview. Thanks for reading!

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Letter from the IHD Chair

Dear IHD Members,

Welcome to this edition of Dispatches! We are pleased to have an issue that focuses on providing a “toolkit” of sorts to help you prepare for international work or a volunteer experience as a physiotherapist. In the past the IHD has provided a teleconference and educational programming at Congress to assist our members in their decision-making and preparation as they embark on these life-changing experiences. Our goal is always to focus on preparing physiotherapists to partake in ethical and sustainable initiatives abroad. We hope that you will enjoy reading this edition and leave informed and inspired by the experiences and insights of the authors.

This edition continues to reflect a change in look of Dispatches. We are now posting individual articles to our website, and sending out links to each article in our monthly e-blasts. We hope that this will make it easier and more convenient for you to peruse the Newsletter and to know more about its content. We know that it is often challenging to find the time to read a lengthy PDF. Please let us know what you think about this new format!

If you haven’t already, please visit our Facebook page www.facebook.com/ihdcanada and ‘like’ us so you can receive our timely and always interesting status updates!

Don’t forget to keep checking our website at www.physioihd.com for new Dispatches content, country profiles, and other information. We look forward to your participation in our upcoming plans!

Thanks for reading Dispatches and being an active member of the IHD.

Best regards,

Danielle Levac  
Chair of Executive Committee  
International Health Division, Canadian Physiotherapy Association  
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Featured NGO Interview – *International Health Initiatives*

Kim is a physiotherapist working primarily in paediatrics. She graduated from the U of T in 2004 and has worked in Ontario, Alberta, and Hawaii. She has now made Vancouver her home and works at BC Children’s Hospital in the ICU. She had an amazing experience volunteering in Tanzania in 2009 with a small NGO (Make A Difference Now), and in Haiti in 2010 with Health Volunteers Overseas. Her trip to Africa spurred a desire to be more involved in global health and it has now become her passion. She recently completed the Queen’s University Community Based Rehabilitation (CBR) and International Development Online Certificate Program and has been privileged to work with IHI since its inception. She and the other executive team members at IHI (Farah Walji - PT; Amanda Ho - OT; Kristina MacPherson - OT) can be contacted by email: info@internationalhealthinitiatives.com

**Interviewed by Kim Hesketh**

**Tell us about a little bit about your organization and what you’re all about.**

In September 2010 International Health Initiatives (IHI) was formed as a response to rehabilitation professionals in British Columbia who expressed an interest in international health. It has become a place where therapists interested in global health can network, share experiences and resources, and work collaboratively on projects. Over the past year IHI has: become a group of over 55 therapists; established official roles for a number of members; adopted a project in Cameroon in partnership with the U of T; had a very successful first fundraiser; launched a Google group and website; presented a poster presentation at the Canadian Society for Hand Therapist conference; promoted IHI through articles and talks; and established by-laws with the goal to becoming a registered society in 2011/12. We are looking forward to the next year where we hope to send members to Cameroon, continue our fundraising events, adopt a second project, build further partnerships with other organizations, become a Registered Society in BC, and continue our mentorship and education events.

Our organization’s mission is to collaborate with international and national organizations to promote the role of interdisciplinary rehabilitation in developing countries. We focus on rehabilitation projects that are ethical, sustainable, and focus on helping to build capacity within communities on an international scale. International Health Initiatives developed out of a common interest amongst rehabilitation professionals in BC to participate in international work and is now comprised of over 50 OTs, PTs, and SLPs.

**How do you prepare students/clinicians for work or volunteer experiences internationally?**

One of IHI's requirements for students and clinicians/volunteers travelling under our group is that they must be involved with the project planning prior to traveling to that country. Other forms of preparation would be mentorship from other therapists who have travelled previously as mentioned above as well as ensuring a good understanding of the mission and values of the group.

**How do you prepare students and clinicians for culture shock and reverse culture shock?**

Our group is comprised of rehabilitation professionals with varying degrees of international experience. As such, we provide mentorship and sharing of experiences. Furthermore, we engage in knowledge sharing and educational presentations during our monthly meetings where research on different countries is presented form geography and statistics to culture and political climate.
How do you ensure cultural competency before students travel? Is it even possible to teach cultural competency?

We believe that it is important to understand the demographics and cultural nuances of the country in which we work. This includes, but is not limited to, understanding the political and economic environment, cultural and religious beliefs, gender roles, and language. We also believe that a solid understanding of our mission and values facilitates a certain level of "cultural competency" in itself.

A recurrent theme of mentorship in IHI is apparent through our monthly meetings and with project planning. As we mentor each other through sharing collective curiosities and experiences, we, as therapists, enhance our abilities to further mentor students during international clinical placements including the area of cultural competencies.

Is there such a thing as being over prepared?

Not likely! It is best to gather as much information and advice about the country you are traveling to as well as about any organizations that you will be partnering with. The only caveat to this would be if the therapist developed certain rigid expectations of what they would experience after gathering information about the country of interest.

How do you counsel a student to examine his or her motives and manage expectations when travelling abroad? What do you do when expectations don’t match reality or when an experience has been very negative or disappointing?

It is important to impress upon students the idea that things will likely never turn out as they expect them to when traveling and the immense importance of being flexible, keeping an open mind and being both mindful and respectful of cultural differences. In this way they are prepared if expectations do not match reality.

It is also important to ensure that students understand that health systems outside of the North American model differ significantly and more so in developing countries. For this reason, it is imperative that the area of interest is well researched with respect to the healthcare system in addition to the other aspects of the country and region. It is important to have goals and objectives related to an international project in order to guide successful implementation, however it is also important to understand that expectations may or may not be met; the latter does not necessarily indicate failure.

What books, articles, websites or resources do you recommend on this topic of preparing for international experiences?

As one of our organization's goals is to act as a resource for rehabilitation professionals interested in international health, our website has a comprehensive list of resources and organizations as well as events related to international health. Please visit our website at: www.internationalhealthinitiatives.com

What is the number one piece of advice you can give to students or clinicians who are seeking to complete a long or short-term work/volunteer position internationally?

Establish equal partnerships with local organizations to ensure that any project that is being undertaken is sustainable and guided by the principles of community based rehabilitation.

Don't plan to go overseas with the expectation that you are going to change the world. Go with the expectation that you are going to help make a difference in the life of at least one individual who in turn will share knowledge and skills gained with his or her community. This is what community capacity building is all about; and have fun!
Do you have any other thoughts or comments to make?

Ensure that you do your due diligence prior to traveling abroad. Follow your passion and make it happen. If it is international work that excites you, then nurture it. There are people who share your interests; make partnerships with them.

Link: www.internationalhealthinitiatives.com
The WCPT website remembers the 2011 Congress as “the event of a lifetime”. WCPT 2011 truly was an incredible and busy few days, and I was very honoured to be selected to represent CPA's IHD. With up to six sessions per day in which to participate, hundreds of posters to view, and over five thousand colleagues with whom to network, it was difficult to decide how to spend my time; one person just could not experience it all. I would strongly encourage you to explore the abstracts and PowerPoint presentations posted at: http://www.abstractstosubmit.com/wpt2011/abstracts/.

Whether you are looking for up to date research to implement in your practice here in Canada or are interested in learning more about global health or health practices around the world, there is something for everyone!

I attended two sessions, which specifically related to this issue's theme of preparing for international work or volunteer initiatives. The first was the International Work and Study networking session hosted by our own Shaun Cleaver. Topics of discussion included: 1) international collaboration; 2) student involvement; 3) bi-directional international exchanges; 4) sustainable development; 5) capacity building; 6) ways to enter into international work; 7) involvement of physical therapy assistants; and 8) short-term opportunities

The second session was a discussion panel on international clinical education. The majority of Canadian physiotherapy programs support and are involved in providing international placement opportunities, and they are willing to receive international students into their clinical placements. These international placements often serve as important starting points for future collaborations, further research and faculty exchange opportunities. An interesting question was raised, however, about whether or not our students seeking international placements interfered with opportunities for the local students of the receiving countries.

In addition to these sessions on global health, I enjoyed hearing from international researchers on everyday practice questions. It was important to see the divide in knowledge and research strategies between countries. Whereas in Canada we know the importance of early mobilization after hip replacement, this remains a research question in Egypt. In contrast, five of the eight presenters on HIV/AIDS were from Africa (one from Brazil) and...
shared valuable information of a condition that is highly prevalent worldwide, but which we hardly touched on in my training here in Canada. It is vital to recognize that Canadian physiotherapists are exceptional in their research and we have much to share worldwide, but we also have much to learn from our global colleagues.

Outside of the sessions themselves, it was inspiring simply people-watching around the convention centre. There was a high spirit of camaraderie between delegates from all corners of the globe. When I think of researchers my first image is usually of old tenured professors - but the number of young therapists balancing research and clinical practice really shows how strong the future is for high quality collaboration and evidence based practice. Perhaps most encouraging to me was that many of the global health sessions I sat in were better attended than the orthopaedics and neurology sessions!

It is impossible to report on three full days of sessions and networking, but I’d like to share a few points that particularly stuck with me: 1) South African children with HIV in orphanages had better total and fine motor development than those in foster care. When many orphanages are being accused of providing poor quality services, we have to be very careful to assess each institution’s programs and the community’s resources. 2) Despite decreasing rates of HIV, there is an increasing prevalence of peripheral neuropathies due to anti-retro-viral therapies (82% of neuropathies began after the start of ARV therapy). Just as we are seeing in disaster relief, decreasing mortality can lead to higher rates of morbidity. What will this do to already overstretched healthcare systems? 3) Patients use words from each of the pain, stiffness, and function categories to further describe stiffness before and after total knee arthroplasty. Clear communication is so important, even without the additional challenges of cultural and/or language differences. With the world at our doorstep and such a wonderfully broad potential scope of practice, it can be terribly intimidating taking the first step into international work. The WCPT opening ceremony keynote speaker, Lorimer Mosely, reminded us that physiotherapists share three characteristics: we enjoy ourselves, we try our very hardest, and we show empathy for others. Whether we go as clinicians, educators, or researchers, if we are sensitive to the needs and the strengths of our receiving countries, I believe that every one of us is able to bring our excellent training and skills and our desire to learn from our patients and colleagues to any part of the world and engage in inspiring and life-changing work.
The first time I went overseas to India, I was petrified. I had answered an ad as a physiotherapy trainer for 6 months at a community based rehabilitation program, called Samuha, in South India. Once I was accepted, I had 3 weeks in which to prepare. This included a weekend course on learning how to teach. I wanted to do overseas development work for many years but my dream had been Africa. All the positions in Africa, however, required a 2-year contract, but the position in India was only 6 months and that’s why I chose it.

Apart from the short course on learning how to teach, I took a lesson on how to drive a motorbike as that was to be my mode of transportation. I wiped out and scraped my knee and elbow, so I travelled to India with bandages and liberal amounts of Neosporin. I didn’t have time for a full course of immunisations but got the most important ones. I boarded my flight full of trepidation. Did I have enough knowledge to teach paediatric physio? Would I get sick? Would I be safe? How would my family dynamics be once I returned?

I arrived in Delhi in 47 degree heat. I wanted to get a bus to the domestic airport but after waiting one hour, I had to get a taxi. During that hour, I experienced the full culture shock. People in poverty, beggars with deformed limbs, bullock carts, men on bicycles loaded down with pots and pans and so much colour, noise and strange smells.

I flew to Bangalore and from there took the overnight train to Raichur in the Deccan Plateau. I never slept, thinking that both my luggage and I were vulnerable. The train arrived at 5.30am and I was met by the Samuha jeep. Once in the jeep, I started to relax as we travelled two hours through rural countryside to the project. As soon as the jeep
pulled into the compound, we were surrounded by glistening smiles and I immediately felt at home. I was shown into a hut with a naked light bulb, a concrete bed, and an open window. This was to be my home for the next six months. The window looked out onto a field, which was being ploughed by a single wooden plough pulled by a team of bullocks. I grew to love this place. I lengthened my contract to one year and even then, I didn’t feel ready to go home.

The following year I set up a non-profit society in Canada to support Samuha’s work and I have been returning to the project for 6 weeks annually ever since. Since 2001, I have been taking Canadian students with me. I help them to prepare by giving them as much information as I can about the food, geography, and culture of Samuha. I go as a supervisor, so I act as an intermediary between the students and the staff. While most of the staff have learned enough English to be able to communicate quite well and to act as translators in the village, we do have a bilingual translator for our teaching days.

During the interview process for potential students, I ask the students many questions: do they enjoy camping? Have they travelled to the developing world before? Can they live away from their loved ones for six weeks with limited communication? I find these to be the most pertinent questions. In preparation, I like them to attend a workshop on cultural sensitivity. I ask them to try and spend at least one day in a child development centre. They seek information from the local travel clinic on advised immunisations.

Essential items to take include soap and a towel, cheap sandals, an alarm clock, a flashlight, a clothes line and pegs, modest clothing, and an Indian selwar kameez (clothing dress). Some students take a thermarest mattress pad as the beds are very hard. Samuha provides mosquito nets but if not, it would otherwise be an essential. The cheap sandals are necessary because we need to take them on and off many times a day. Therefore we need footwear that is easy to remove. Most first aid supplies are available except sterile gauze and sterile dressings. Although we are gradually building up a library, most students find it easiest to bring all their pertinent notes on a pen drive. Paper is considered expensive and so should it be bought by the therapist.

Useful items to bring include a goniometer, splinting material, notebook, and pictorial teaching diagrams.

Samuha has its own orthotic workshops so they make all their own splints, braces, walking aids and adaptive equipment. The raw materials are useful but ready-made products are redundant. At the end of the placement period there is a farewell party with exchange of gifts. Samuha staff always give each of us a silver bracelet, so it is good to be prepared to bring something for them. Often the students choose to give them framed photos, which are appreciated.
The main thing when embarking on an overseas placement is to go with an open mind and with humility. We may be well trained and have advanced knowledge but the people in the country we venture to have tons of experience and resourcefulness relevant to their own culture. Although their educational qualifications may be low, it is only because they lacked the opportunity. Many rural Indians have attained only a grade four level of education, and unfortunately they were unable to progress further for many reasons.

There are also many cultural customs and taboos to be aware of. In rural India, men do not wear shorts. Women do not show their legs. Traditional clothing is a dress worn over loose pants and a scarf draped over the chest to ensure modesty. Men and women sit separately. Couples do not demonstrate affection publicly. Food is eaten with the fingers. The left hand is never used to serve food nor to pass objects to others. Toilet paper is not used. Instead they use a jug of water for cleaning; in fact a much better system! Be sure to observe local custom and culture as it is easy to offend by a simple mistake. One time I climbed up onto a concrete platform surrounding a certain tree with my shoes on. The elders of the village were furious as this was a sacred place and I had desecrated it by standing on it with shoes. Samuha staff had some quick explaining to do to smooth over the situation.

When going overseas to work, it is very important to observe initially and then try and use current practices as much as possible, unless you are convinced that your way is a much better way. The local rehab workers are usually very keen to learn but when you teach them a certain technique with one client, they may use that same technique with everyone unless you explain the rationale carefully.

Good books to take along include Disabled Village Children and Where there is no Doctor, both by David Werner. Nothing About Us Without Us is also good, but overlaps quite a bit with Disabled Village Children. These two books have lots of good ideas for working with little equipment. They also have simple teaching ideas. The medical book is useful if you are the only health professional in the area, as you will then be asked to help in all kinds of situations. If you are going to be working in a medical facility then it is not necessary. One time I was called to go to a village where a young man had been thrown by a bullock. My immediate thought was that he had been gored so we collected up some dressings and bandages before driving out there. As it turned out, he had not been gored but had broken his neck. I then had to mobilise the village to fill bags with sand and to find a wooden board to carry him on. We carefully transferred him on to a spare door, immobilised his spine with sand bags, lifted him into the back of the jeep and drove 2 hours to the train station where he took the overnight train to Bangalore, the nearest city. He mostly recovered with some residual weakness. You never know what challenges may confront you and how you may rise to the challenge.

Reverse culture shock was way more profound on my return than the initial culture shock was on my arrival. I wanted to get rid of all my possessions; they seemed so unnecessary. Everyone appeared like giants after the short stature and malnutrition of the local Indians. The streets seemed empty and lifeless after the bustle and colour of Indian towns. I returned home just before Christmas, which was a big mistake as the small gifts I had bought in India seemed insignificant, but I couldn’t bring myself to buy expensive toys and appliances as were usually expected.
Working overseas in a developing country can be a life-changing experience. My year overseas has certainly enriched my life. I have since set up a charity in Canada to support the work of Samuha and I give talks and slideshows on international development work. I continue to return annually as clinical supervisor for Canadians students, which enables me to monitor the program and to provide more teaching as needed.

If you are debating whether to go overseas or not, I encourage you to just do it. My main regret is that I left it until so late in life. I had wanted to go overseas for many years but the time in my life never seemed right. By the time I went, I was 50 years old, but had I gone earlier, maybe I could have made a career of it by joining a development organisation. Instead, I now continue to practice in rural northern Canada with predominantly First Nations children, so the two areas of practice complement and enhance each other.

The International Health Division of the CPA is a great resource with a wealth of information for those wishing to serve overseas.

It would be wonderful if all young Canadians had a chance to serve overseas. We are so blessed here in Canada but we take it all for granted. A year overseas in a developing country can be life-changing and certainly helps to build empathy between nations. As physiotherapists we have a unique opportunity to make a difference and those that seize the opportunity are richer for it. Just do it!

Link: www.samuha.ca
A Student’s Guide to Embarking on an International Placement

Jennifer Allen graduated from the MScPT program at the University of Alberta in 2010 and is currently practicing as a physiotherapist in both private practice and an acute care hospital in Edmonton, AB. Originally from Saskatchewan, she completed her Bachelor’s degree in Kinesiology and Health Studies at the University of Regina in 2007. She volunteered as a Gender Advocacy Assistant in Zabzugu, Ghana in 2008 with the World University Service of Canada (WUSC) through their Students Without Borders program, and completed her final placement in physical therapy in Rongo, Kenya in the summer of 2010 (blog: http://rafikijeninafrica.blogspot.com/). She can be contacted via e-mail at jen.allen@ualberta.ca.

By Jennifer Allen

When I applied to physiotherapy schools in Canada three years ago, one of the first things I looked into was which schools offered international placements. Two years later in June of 2010, I travelled to Rongo, Kenya to do an international placement in partnership with the Kenya Working Group (http://www.kenyaworkinggroup.org/info/details/partnerships.html) based out of Toronto and the Disability Service Programme in the Nyanza province of Kenya. Regardless of where you plan to go on your student placement, below are some tips to help you not only plan for success, but ultimately have a great learning experience and give back to your host country.

Evaluation of Intent

Prior to researching possible locations for your placement, you must ask yourself what your intent for going will be. Do you want to experience another culture different from your own? Do you want to travel? Do you want to practice communicating with people from another culture? Do you want a glimpse of life outside of developed countries like Canada? Do you want to ‘give back’ to a community in need? With an in depth understanding of your motivation to go on an international placement, it is possible to move on to choosing the placement that is right for you.

Finding a Placement

The first place to look is on your program’s website to find out where past students have completed their international placements. For example, here are links for the University of Alberta and Queen’s University programs:
http://www.rehabmed.ualberta.ca/clinicaled/International.htm

Next, you will want to take a look at the Canadian Physiotherapy Association International Health Division website http://www.physioihd.com and peruse the blog history of students and clinicians alike. Another way to search for potential international placements is through none other than a Google search or talking to friends and family to spark some ideas. Once you have narrowed your search down and selected one suitable option, you will be ready to get down to business and start planning your international placement experience.
Preparing for your International Placement

Most universities have checks and stops and a pile of paperwork for you and your Clinical Coordinator to complete prior to getting the green light to go on your international placement. These hurdles may take up to a year to jump over, so make sure you start your planning early to avoid disappointment. You may be surprised at the amount of work it takes for you and your Clinical Coordinator to successfully plan your international placement. Refer to the International Placement Request Package link on the University of Alberta’s MScPT International Placements website as listed above for an example of a checklist. After you have contacted your host site to ensure that a physical therapist is willing and able to accommodate you during the time allotted for your international placement, you may have to complete any or all of the following:

- ensure that your host country is a member of the World Confederation for Physical Therapy (WCPT)
- read preparatory materials provided by your site and/or your university
- submit a written proposal which may include rationale for going on your international placement of choice and projected outcomes and impact
- submit a formal request for an international placement
- prepare a budget
- ensure that your host country is safe to travel to by checking the Canadian Department of Foreign Affairs website for an updated travel advisory for your host country
- complete medical requirements and ensure immunizations are up to date for travel (some students who have specific allergies have not been permitted to go on certain international placements for safety reasons and some international placements require vaccinations prior to entrance into the country)
- submit a contract
- submit release of liability forms
- obtain a valid Canadian passport
- obtain a visa for your host country
- provide proof of medical travel insurance
- provide evidence of an emergency plan
- register with the Canadian embassy in your host country
- make a communication plan to stay in touch with your Clinical Coordinator while abroad.

Preparing to Visit your Host Country

Once the paperwork is underway, you can start researching your host country. A good place to start is online on the WCPT website: http://www.wcpt.org. Talking to other physiotherapy students and practitioners who have been to your host country is also beneficial to gain insight into the strengths of the country and challenges it faces. You may want to search the World Health Organization’s website, http://www.who.int/en/, for recent reports related to global health on your host country. If the primary language spoken in your host country is one other than English, you may choose to begin putting some important words including greetings and typical words used in physical therapy assessment and treatments to memory. Further, the Lonely Planet guide to your host country would be an excellent book to invest in, as the Lonely Planet books provide a wealth of knowledge about a variety of countries and regions.

Preparing for Intercultural Effectiveness

The final step after you have booked your flights (I recommend www.flightnetwork.com and www.faregeek.com), purchased travel insurance and have your travel visa in hand, is to read up on
intercultural effectiveness to ensure that you will be upholding not only the profession of physical therapy when you embark on your international placement, but also developing relationships through acting as an interculturally effective person. Intercultural effectiveness involves three key attributes:

1) an ability to communicate with people of another culture in a way that earns their respect and trust,

2) the capacity to adapt his/her professional skills (both technical and managerial) to fit local conditions and constraints and

3) the capacity to adjust personally so that s/he is content and generally at ease in the host culture.¹

The Government of Canada offers a complimentary publication entitled A Profile of the Interculturally Effective Person by Thomas Vulpe et al. that was designed to provide a comprehensive guide to successfully living and working in another culture.¹

Good luck!

Reference

Discovering the “Joy of Life” in Sarajevo

Part 1: Preparing for Clinical Placement Overseas

Lindsey Chamberlain is a 2nd year MScPT student at Queen’s University in Kingston, Ontario. She completed her undergraduate degree in Sport, Health & Physical Education at Vancouver Island University in Nanaimo, British Columbia. Her clinical placement in Sarajevo will be her first overseas experience related to international health development. Upon graduation she plans to play an active role in advocating for the involvement of Canadian physiotherapists in tackling global health issues, both on a local and international level. She can be contacted via e-mail at 01gc1@queensu.ca.

By Lindsay Chamberlain

One of the most exciting aspects of life is having the opportunity to transform dreams into reality. For several years I have had the desire to participate in an international project that would positively impact the lives of others. In April 2012 I will have this opportunity when my classmate Lisa and I travel to the city of Sarajevo in Bosnia and Herzegovina for our final clinical placement as MScPT students at Queen’s University.

My journey towards deciding to participate in an international placement has evolved during my time as a student. One of the reasons I selected Queen’s University to complete my physiotherapy training was because of the emphasis they place on providing international learning opportunities to their students. It is inspiring to see my classmates travel across the globe, to places such as India, El Salvador, Hong Kong, and Tanzania, in order to enhance their clinical skills and cultural competencies while contributing to the communities in which they are based.

In the initial stages of my program, when the international placement application deadline was fast approaching, I began doubting my plans. Questions about having adequate finances, enough time, and the courage to successfully engage in a cross-cultural learning experience were at the forefront of my mind. It was during this time that one of the patients I was treating at a clinical placement said to me, “You need to seize as many opportunities as you can. Life’s too short not to take risks.” It was her advice that prompted me to follow through with my application. Embracing the personal risks associated with participating in an international project was a pivotal moment in my preparation for this experience. It has allowed me to move forward with confidence and a willingness to commit my time and finances in order to make a positive impact and grow as an individual.

Sarajevo was heavily impacted by the Siege of Sarajevo that occurred during the Bosnian War from 1992 to 1995. During this time 250,000 people lost their lives while another 175,000 were injured. Access to health care, social, and communication services was severely disrupted and electricity, food, and water were scarce. The residual effects of war created a dire need for accessible rehabilitation services throughout the community. It was this need that prompted the International Centre for the Advancement of Community Based Rehabilitation (ICACBR) at Queen’s University to establish projects throughout Bosnia and Herzegovina that would promote community based rehabilitation (CBR) education, policy development, service delivery, and research. Although ICACBR is not presently running any projects in Sarajevo, it has acted as a tremendous resource in the preparation for this trip.

Djenana Jalovic, ICACBR’s Director, has been a key liaison and support. Her connections with the area and experience in international development have been extremely helpful, especially when language barriers limit our ability to communicate with organizations directly. Some of the many things that Djenana has done to aid in the preparation process include establishing connections with a local host organization, arranging for a clinical supervisor to oversee the project, providing travel
advice, and overseeing the details of the project as a whole. Djenana’s support has been an essential element in making this clinical placement a reality and I would highly recommend establishing connections with individuals who are familiar with your cultural or geographical area of interest when preparing for a cross-cultural experience such as this one.

During our time in Sarajevo, Lisa and I will be working with *Joy of Life*, a non-profit organization aimed at supporting mothers of children and adolescence with a disability. Today they have approximately 100 members who participate in a variety of activities including day care, music workshops, speech therapy, reading therapy, painting and art workshops, sports and recreational activities, and sewing and knitting classes. *Joy of Life* is committed to integrating children with disabilities into the community and increasing public awareness through the programs they provide.

At present, much needed physiotherapy services are not offered at the centre. Lisa and I will be focusing our efforts on performing initial physiotherapy assessments of the children and involving their families in administering therapeutic interventions at home. We will also be developing physiotherapy related educational resources that can be utilized by community members and families after our departure. Both Lisa and I have an extensive background working with children and youth in a variety of non-physiotherapy related settings, such as summer camps, after-school care, and swim programs. The skills we’ve developed through these experiences will serve as a great foundation as we prepare to work with the children at *Joy of Life*. We also hope to utilize the knowledge and clinical reasoning skills we’ve developed through our paediatrics course at Queen’s University to guide participants toward functional goals and enhance their integration into the community. Although we intend to make a meaningful contribution to *Joy of Life* and the surrounding community, we also anticipate that this project will be an enriching experience where we will be able to develop our own clinical skills and gain a greater understanding of the role that physiotherapists can play in international development. One of the challenges that Lisa and I have at the forefront of our minds is the professional and social isolation we may feel due to our inability to use English as a primary mode of communication. Although translators are available to assist us, they will not be present all of the time and it is unrealistic for us to try to learn the local language during our brief stay in Sarajevo. We are currently developing strategies to overcome the language barriers we will face which include learning essential phrases in Bosnian and communicating more with images and gestures rather than words. The support we provide to one another will also be tremendous as we adapt to being in a new cultural environment. I am learning very quickly that overseas projects require an extensive amount of planning and organization. Fortunately, a visa is not required for participation in a clinical placement in Bosnia and Herzegovina and only a hepatitis A vaccination is required. To ensure the safety of their students, Queen’s University requests that all students who participate in an international experience complete an extensive risk assessment of the region they will be visiting. This can be a lengthy and time-consuming process but it is essential that the risks associated with the project be acknowledged prior to departure.

Canada’s Foreign Affairs and International Trade website has been a great resource in identifying these risks. Lisa and I are fortunate because *Joy of Life* will be assisting us in finding rental accommodations during our time in Sarajevo. Closer to departure, we will be arranging our own flights and travel insurance. I am grateful to be the recipient of the *International Health Division’s travel bursary*, which will help to mitigate some of these travel expenses.

As the departure date draws closer, I am becoming more cognisant of the impact this trip will have on my own understanding of global health issues and the need for accessible health care services in less developed countries. I have been trying to gain a greater perspective on life in Sarajevo and the impact of the Bosnian War through reading travel
guides, websites, and novels such as *The Cellist of Sarajevo* by Steven Galloway; however, I am certain that most of my understanding will come from hearing the stories of the city’s people and immersing myself in their culture and way of life. I am eager to begin working with *Joy of Life* and look forward to positively contributing to the Sarajevo community through this project. I am also excited to discover how I will be professionally and personally impacted by discovering the Joy of Life in Sarajevo.

Link: [www.queensu.ca/icacbr/index.html](http://www.queensu.ca/icacbr/index.html)
Danielle Levac - Chair, International Health Division

Bio:
Danielle Levac is currently Chair of the IHD and was Editor of Dispatches from 2006-2008. Danielle graduated from the University of Ottawa in 2001 and has worked as a physiotherapist in pediatric acute care, rehabilitation, and school health support settings. She is currently completing her PhD in Rehabilitation Science at McMaster University. Danielle has volunteered as a physiotherapist in Guatemala on 3 occasions in 2005, 2006 and 2008, and in Vietnam with Health Volunteers Overseas in 2006. She can be contacted at danielle_levac@yahoo.ca.

Tips/Advice:
• Contact CPA to purchase and listen to the IHD’s teleconference about preparing for international health experiences
• If possible, contact other volunteers who have volunteered for the organization or worked in that part of the world
• Do some reading: get familiar with environmental health determinants, such as poverty, war and conflict, nutrition, education, water and sanitation that might be affecting your clients. Think seriously about your tolerance level for the potential difficulties, geopolitical uncertainties and safety hazards that can occur when working in a developing country. How well do you deal with travel uncertainties and risks, political uncertainties and safety issues, for females in particular? Can you adjust to uncomfortable living conditions, and different climates? Not speaking the language? Unaccustomed foods and cultural expectations? Potential exposure to disease and injury, illness or fatigue? How well do you react and adjust to new ways of doing things? How will you cope with the loneliness that may arise when you are alone in a completely foreign environment? How will this experience influence your career path, and how will it fit into your budget/savings?
• Ask yourself: What can I gain from an international experience? Before embarking on this experience, it is important to think about your motivation behind wanting to do international volunteer work. What are some of the learning experiences that you are seeking? What personal learning and growth do you envision might take place?
• Ask yourself the following questions:
  o What do I think my contribution will be, given the amount of time I am in the location?
  o Why and how do I anticipate so that I can make a difference?
  o What is “making a difference”? How do I define that? Is it making a difference for one person, a family, a community?
  o How will the experience serve my needs?
  o How will I be sure my efforts are not inadvertently causing harm?
  o What is the sustainability of the project and of my efforts?
  o How will I deal with the power differentials that may come from being a westerner in a developing country?
  o How will I cope with different cultural realities and expectations?
  o Lastly, what will I do with this experience once I return home?
Michelle Fraser - Chair Elect, International Health Division

Bio:
Michelle Fraser, PT, BA, BScPT, FCAMT, CYT
Michelle has worked in orthopaedic physiotherapy since 1994 and is currently practicing in Guelph, Ontario. She is a registered instructor with the Orthopaedic Division of the CPA, and is a certified yoga instructor. She has taught continuing education courses to physiotherapists in Nicaragua, and is involved in the development of community health worker educational programs in Malawi, with Dignitas International. She is currently completing her MEd at OISE with the specializations of health professional education and global health education. She can be contacted at michellefraser@bell.net.

Tip/Advice:
Michelle recommends learning as much as possible about a country or community before travelling, in order to maximize your understanding of that community and in order to try to ensure a respectful and mutually beneficial relationship.

Julie Woodroffe - Secretary, International Health Division

Bio:
Hello! I am very excited to be the new Secretary for the IHD!! I am just graduating from Physiotherapy at Dalhousie University and will be starting work at the Hospital in Yarmouth, Nova Scotia rotating through all the disciplines of PT. I am very interested in global health in general but specifically, global standards of physiotherapy and producing sustainable rehabilitative care in developing countries. My 6-week clinical placement in British Guyana back in Jan/Feb increased my interest in this area. It was an amazing learning and cultural experience and completing an international placement or volunteer term is something I would recommend to everyone! Contact me at juliewoodroffe@dal.ca.

Tips/Advice:
• Learn as much as you can about the country, climate and culture you will be entering.
• Get logistics done early (immunizations, currency, etc.)
• Talk to as many people as you can who have been there before you

Thanks and I look forward to the year ahead and the adventures it may bring!

Jennifer Allen - Treasurer, International Health Division

Bio:
Jennifer Allen graduated from the MScPT program at the University of Alberta in 2010 and is currently practicing as a physiotherapist in both private practice and an acute care hospital in Edmonton, AB. Originally from Saskatchewan, she completed her Bachelor’s degree in Kinesiology and Health Studies at the University of Regina in 2007. She volunteered as a Gender Advocacy Assistant in Zabzugu, Ghana in 2008 with the World University Service of Canada (WUSC) through their Students Without Borders program, and completed her final placement in physical therapy in Rongo, Kenya in the summer of 2010. She can be contacted via e-mail at jen.allen@ualberta.ca.
Tips/advice:
Jen's advice to other physiotherapists who want to work or study internationally is "dive in, immerse yourself and share your experiences with others when you come up dry."

Ibukun Adeodu - Newsletter Editor, International Health Division

Bio:
I graduated from Queen’s University in 2007 with a Master’s of Science in Physical Therapy. I have since worked in the private practice setting, both in clinic and in retirement and long-term care homes in Ottawa. While at Queen’s, I completed my Master’s research project on cultural competency, and I also completed a student placement at Kiwoko Hospital in Uganda. Last year I travelled to Kenya with a multi-professional team and worked with the rehab team at a school for children with disabilities. My experiences have shaped my views about global physiotherapy and helped develop a passion to continually advance the physiotherapy profession both at home and abroad. I have been the IHD’s newsletter editor since 2010 and I enjoy producing these newsletters. It is a great way to be involved in international health while I am practicing here in Canada.
I can be contacted at iadeodu@gmail.com.

Tip/Advice:
My advice is to be flexible, adaptable, open minded, and willing to learn from others in whichever country you are venturing into. Having an attitude of humility will take you a long way and help you to be better received. Be aware of the culture, environment, and society which you will be in, but do not try to form too many expectations; especially ones based on other people’s experiences. Let your story write itself. While cultures may be vastly different, it will help you to remember that ultimately, as a human race, we all need and want the same things in life. You can always connect with others at this level.

It is also very important to be aware of internal motivations of why you are going. Are you going for you, or are you going for the people you will be serving, or both? Examine the values of whatever organization you may be going with. Sometimes we go to other countries for the wrong reasons, often with good intentions. But sometimes helping actually hurts.

Be introspective before, during and after your trip. If the culture you go to is quite different from what you are used to, you will need to process your experiences there and be aware of culture shock (both when you are there, and when you get back home). Working internationally is not for the faint of heart. If it is your first time overseas, especially if you are working/volunteering in a developing country, you may be shocked by what you see and experience, especially the dichotomy between degree of wealth and the degree of poverty, and the fact that as someone coming from the West, you may have significant privilege and access. You may come back either disillusioned, or ready to take it all on and change the world. I would encourage you to be full of passion, energy, initiative and drive for your vision, but I caution you to also have a realistic view of what you as an individual can do. Know your limits. Don’t be a hero and try to change the world in one go. But do get together with other like-minded people (both at home and abroad) and commit over the long term to do whatever you can to meet your goals.

Remember that sustainable change best comes from within a community. As cliche as this is, it is better to teach a man how to fish, rather than to just give him a fish. But also, don’t impose your fishing methods on the
man! Rather, partner with the people in the community and under their leadership, ask, what can I leave behind that, when I am long gone, will continually contribute to meeting your goals?

Lastly, there will always be a reason why you can’t go. Fear is not a valid excuse. If you want to experience working/volunteering internationally as a physiotherapist, have courage and go for it!

**Marianne Stevens - Research Rep, International Health Division**

**Bio:**
Marianne Stevens completed her physiotherapy degree from McMaster University in 2007. While there, she was fortunate to have the opportunity to travel to Kenya to complete her last clinical placement. Upon returning from Kenya, Marianne worked as a pediatric physiotherapist at a children’s rehab centre, The John McGivney Children’s Centre, in Windsor, ON. After working there for two years, Marianne began her doctoral degree at the University of Toronto in the Graduate Department of Rehabilitation Science. Her primary supervisor is Stephanie Nixon, and her work will focus on the intersectionability of children, HIV, global health, rehabilitation and disability. Her fieldwork will be conducted in Lusaka, Zambia. Marianne has been on the International Health Division executive for just over two years as the Research Representative. Her term will end in December 2011. She can be contacted at marianne.stevens@utoronto.ca.

**Tip/Advice:**
Start planning for your trip well in advance, and talk to others that have gone on similar trips, to ensure you are as well prepared as you can be before arriving.

**Bashir Versi - Website Coordinator, International Health Division**

**Bio:**
I completed my Masters of Physiotherapy at McMaster University in 2005 and since my graduation, have worked on a number of different units at St. Joseph’s Healthcare in Hamilton. I currently work on an inpatient orthopedic floor in addition to serving a role as a physiotherapist and certified diabetic educator in an outpatient diabetic programme at the hospital. My international physiotherapy experience is limited to a 6-week clinical placement in New Zealand, although I also have some very limited volunteer experience in Tanzania, where I lived before coming to Canada for university. I can be contacted at bashir.versi@gmail.com.

**Tip/Advice:**
My advice regarding international work would be this: it’s never too late to go! You will rarely ever feel completely ready, but most experiences rely on an ability to creatively think rather than to just apply physiotherapy skills. You often find that you more know than you realized!
Carah Davis - Student Rep, International Health Division

Bio:
My name is Carah Davis, and I am the current student representative of the IHD. I graduated from Acadia University in 2009 with a Bachelor's Degree in Kinesiology, and am graduating with my MSc. in Physiotherapy from Dalhousie University in October! Upon graduation, I will be working at the Yarmouth Regional Hospital where I will be working inpatients, outpatients, and in the community to try and gain some valuable experience in a variety of areas. My international work experience includes a summer internship at the Ministry of Health in Belmopan, Belize, and my MSK clinical placement in Dublin, Ireland last summer. In addition to working abroad, I have a general love of travel in itself, which has taken me across Canada, around Western Europe, and to Israel. I can be contacted at carah.davis@dal.ca.

Tip/Advice:
My advice for anyone going to work/volunteer abroad would be to go into the experience with no preconceived notions as to what you will experience or how it will affect you. Everyone reacts to international experiences differently, and each international placement/location is unique. So I find it is best to go with no expectations and let the people you encounter and the place itself be what shapes your experience. Happy travels!

Sameera Chaudhary - Student Rep, International Health Division

Bio:
Sameera is a soon-to-be graduate of the University of Alberta with a passion for global healthcare and interdisciplinary teamwork. Her early childhood was spent in Nairobi, Kenya before moving to the multicultural city of Toronto and eventually studying health sciences in London, cultivating her keen interest in international health development. She can be contacted at sachaudh@ualberta.ca.

Tip/Advice:
My advice for preparing to volunteer abroad is to get an insider's view by speaking to others about their experiences abroad, to plan well in advance, and to make sure to travel with an open mind and heart.
A List of Useful Resources in Preparing to Volunteer Abroad

Sameera is a soon-to-be graduate of the University of Alberta with a passion for global healthcare and interdisciplinary teamwork. Her early childhood was spent in Nairobi, Kenya before moving to the multicultural city of Toronto and eventually studying health sciences in London, cultivating her keen interest in international health development. She can be contacted at sachaudh@ualberta.ca.

By Sameera Chaudhary

Mapping Your Volunteer Vacation
Author: Jane Stanfield

This helpful resource includes a detailed guideline, practical advice, and is a hands-on workbook with areas for notes, questionnaires, budgets and planning details that the user can fill in. The workbook is divided into sections that are arranged by a timeline, from 6-12 months before you leave, to tips for post-travel. Sections include travel planning, budgeting, health concerns, passports and visas, packing tips, researching and selecting a volunteer organization and program, as well as useful websites and contact information.

Volunteering Around the Globe: Life Changing Travel Adventures
Author: Suzanne Stone

Well-organized, step-by-step guidelines for how to plan and carry out a volunteer trip abroad in areas of healthcare, world peace, literacy, archaeology, education or the environment. The book provides details about a variety of sponsoring agencies each with its own culture and mission and valuable tips for choosing a trip. The author also includes a personal account of her own experiences to inspire and empower the reader.

How to Live Your Dream of Volunteering Overseas
Authors: Joseph Collins, Stefano DeZerega, Zahara Heckscher, Frances Moore Lappe, and Anna Lappe

A user-friendly guide that provides necessary information on volunteering in Latin America, Africa, Asia, the Middle East, and Eastern Europe. Topics covered: deciding if volunteering overseas is for you, choosing the right program, what to do before and after you go abroad, financing and fundraising, how to be an effective volunteer, safety issues and how to overcome language barriers. The bulk of the book focuses on organizational profiles and critical analyses of volunteer organizations. It also includes case studies, worksheets, and quotes from international volunteers.
This is an opportunity for you to voice your thoughts on the content of this edition. Send a quick a Letter to the Editor and your comments may be published in Your Voice in the next edition of Dispatches.

Your comments/questions on both content and format are welcomed.

Discussion questions:

1. The term medical tourism has, in some circles, negative undertones. In your opinion, what, if any, are the problems with medical tourism?
2. Are there good or bad reasons to go abroad for volunteer experiences? How do we examine the underlying values behind and motives for travelling abroad and determine whether or not these motives are acceptable?
3. When we travel, we often document our experiences by taking photos and sharing them on blogs, through emails, in presentations, or through social media. What are the ethics and implications of doing this? Do you think consent is a prerequisite to posting photos? Are there some photos that should not be posted publicly? Why or why not?

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