Sustainable Orthopaedic Trauma Volunteering in Developing Countries

Traumatic injuries in low- and middle-income countries (LMICs) are associated with increased morbidity and mortality rates while there is a shortfall of healthcare workers and resources.

Medical volunteers from high-income nations including surgeons and trainees bolster short-term medical operations, education, and infrastructure development.

Literature review on the current scenario of global orthopaedic volunteering.

Barriers to medical volunteering:
- Inadequate funding
- Scheduling inflexibility
- Lack of international electives during training

Benefits to volunteers:
- Exposure to uncommon musculoskeletal pathology/sequelae
- Acquisition and reinforcement of technical and clinical skills
- Decreased dependence on advanced imaging modalities
- Resource-conscious treatment
- Increased cultural competency

Host countries:
- Prefer that volunteer trainees complete cultural competency courses before arriving
- Encourage recurrent volunteering trips from individuals and institutions
- Ideal volunteers are residents nearing completion of their training (postgraduate years 4 or 5) or physicians who have been practicing for several years

For a sustainable volunteering partnership, focus should be on capacity building to educate and train local providers to enhance their independence and quality of service.

Medical volunteers and their institutions must be encouraged and supported to provide short-term assistance and long-term capacity building in LMICs.

Global Volunteering in Orthopaedics: Availability and Implementation Considerations
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