

Towards Best Practices in the Global Health Institute: First, Do No Harm – Guidelines for Donations

Summary: Donations should be neither an expectation nor requirement for students participating in field experiences, and are generally discouraged. For those who choose to provide gifts or donations, this document provides some guidelines for such activities.

Introduction

It is the inherent desire to help others and concern for the well being of others that stimulates many people's interest in global health. These desires often drive the decision to pursue a field experience. It is this same goal that prompts some to bring gifts and donations with them on their field experience. While these donations are procured with benevolent intentions, unexpected downstream effects, complications, and difficulties may accompany such donations.

Categories of Donations and Potential Pitfalls

Material Goods and Gifts

It is often customary to bring gifts to the family or professional who is hosting you. When these gifts are something particularly requested by the host or are an item that holds meaning for the visitor they can have a long-lasting positive impact for both host and visitor.

The giving of material goods or gifts to patients, strangers, and colleagues can pose ethical dilemmas. The giving of gifts by a visitor in a medical setting jeopardizes the professional relationship that exists between patient and medical personnel. Even small gifts can alter the therapeutic relationship and establish unrealistic expectations for future visitors (e.g., the expectation of hospitalized children that all visitors will bring them toys, stickers or pens based on their experience with a visiting trainee who brought them these items). A similar phenomenon may exist when gifts are given to strangers or acquaintances in the community. For group travel, coordination of gifts for hosts will avoid embarrassment or misunderstandings.

Money and Scholarship Requests

For many participating in a field experience, there will exist a large discrepancy in the wealth and resources available to the visiting trainee and that at the disposal of people with whom they will work. Simply the cost of a trainee's plane ticket may surpass the annual salary of some of their patients and hosting colleagues. The disconnect may create an undeniable but often unspoken difficulty for both host and visitor. Visitors may encounter situations where they are asked for money or sponsorship/scholarship for a co-worker, patient, or friend. The limitations, future obligations, and sustainability of such donations are frequently problematic. Additionally, differentiating between multiple requests or escalating requests creates ongoing difficulty for visitors. Again, the expectation that visitors will provide similar support creates the potential for difficulty for future visitors.

Medical Supplies and Equipment

Medical supplies and equipment are frequently donated items--both from individuals and institutions. Unfortunately, simply the lack of use of an item in one facility does not make this item ideal for use somewhere else. The donation of medical equipment may present challenges. Items may be inappropriate for the setting (testing for a disease for which treatment is not readily available), require substantial training for appropriate and safe use (ventilators which require multidisciplinary training and expertise), be dependent on another product to function (laboratory equipment that requires reagents for use), require specialized parts or maintenance (patient monitors that require a technician for repair or diagnostic support), are single use products (resulting in problems for safe disposal), or are unable to be safely adapted (electronics with differing voltages or connections). These examples are just a few of the possible complications related to donated items. Often the person donating or bringing the item has gone to great trouble to ensure its safe transport and delivery. Unfortunately, their goodwill can result in complications they could not have predicted.

Consider bringing up to date medical or surgical texts (written in or translated to the appropriate language if available) to donate to your hosting supervisor or preceptor for use in the clinic or hospital library. Although CD ROMs of medical texts can be useful and light to carry, keep in mind that computer access may be limited by electrical outages or prohibitive user fees.

Pharmaceuticals

Donations of medications are a particularly problematic category that deserves special attention. Downstream complications of donated pharmaceuticals can be costly, both financially and individually. Inappropriately used medications can result in disability and death. What may seem obvious in one setting can be much less clear in an alternate environment.

Common pitfalls related to donations of pharmaceutical products include:

- Labeling unclear or in a language difficult to understand.
- Double standard for safety employed (e.g. expired drugs).
- Samples given when no option exists for continued prescription (e.g. sample medications for hypertension given to a patient who has chronic hypertension).
- Drugs not relevant to the situation (e.g. drugs for dementia sent to a children's hospital).
- Facility does not have capacity to store or safely prepare medications (e.g. lack of refrigeration, lack of clean water to prepare suspensions).
- Drugs unknown to the local health professionals and patients (e.g. prescribed or used inappropriately, side effects not appreciated or unable to monitor for side effects if required lab testing is not available, "benign" medications such as vitamins or ibuprofen which can be taken in excess and have significant side effects).
- No system in place for safe dispensing of donated drugs (e.g. no syringes or dispensing cups, no staff to sort, illiterate patient population requiring pictographs rather than written instructions).
- Sorting of donated medications requires substantial manpower.

- Unused or inappropriate medications need to be disposed of (e.g. may require substantial cost for safe disposal such as incineration).
- Drugs do not reach the intended recipients (e.g. they are sold in underground unregulated market).
- Drugs do not comply with local policies or standard treatment guidelines.

It is typically cheaper for drugs to be purchased locally or from specialist nonprofit procuring agencies closer to the site. Local procurement, which involves only a fraction of the transport costs, encourages locally sustainable drug availability. Provision of funds for direct procurement from specialist non-profit agencies such as the International Dispensary Association, is the most helpful strategy when supplies are not available locally.

Five Core Principles for All Donations

All donations should:

- be of maximum benefit to the recipient
- respect the wishes and authority of the recipient
- not create double standards in quality or sustainability
- result from effective communication between donor and recipient
- not create future expectations that cannot be met

Adapted from World Health Organization's Guidelines for Drug Donations, Revised 1999.

Guidelines and Recommendations Regarding Donations

While there are many potential pitfalls that exist with respect to well-intended donations and gifts, the following guidelines should be used to minimize unforeseen complications.

Give your host the opportunity to guide you to ensure that your gift is welcome, appropriate, and needed. Recognize that this initial communication should be worded in a way that allows you to enquire about what is needed or desired by your hosts without committing you to bringing things that you cannot reasonably provide.

Employ the five core principles cited above. Prior to any donation, ask yourself if the donation meets all five principles. If it does not meet the core principles, strongly consider leaving it home.

Do not distribute gifts or donations directly to patients. If you do bring things with you to donate, consider giving them to your hosting supervisor or the head of the hosting organization and asking them to distribute the donations as they see fit.

Avoid all drug donations. If for some reason you are in a situation where drug donation is essential, abide by all elements of the WHO Guidelines for Drug Donations. Become familiar with the WHO model lists of essential medicines for guidance in selecting appropriate medications for donation. Do not attempt to

transport controlled substances across international borders. Be prepared to pay an import tax on donated medications should such a tax be imposed by the recipient country. Donated medications should be transported in their original packaging, with expiration dates clearly marked.

If you are asked by your host institution specifically to bring pharmaceuticals or medical supplies, consider using these sources:

1. IDA International Dispensary Association:

http://www.idafoundation.org/fileadmin/user_upload/Documenten/PDF/Product_Library/IEHK_2006_from_IDA_Foundation.pdf

NOTE: WHO approved Interagency Emergency Health Kit

2. UNICEF - United Nations Children's Fund

Unicef Plads - Freeport

<http://www.supply.unicef.dk/catalogue/index.htm>

NOTE: Useful only if you are working with a NGO registered with UNICEF with specific emergency packs containing medical supplies or medical equipment, pharmaceuticals, nutritional rehab, education, shelter and sanitation.

3. MAP Travel Packs

http://www.map.org/site/PageServer?pagename=travel_Map_Travel_Pack

Medical Assistance Program International: For \$450 you can purchase \$14000 (wholesale cost) worth of pharmaceuticals, including domestic shipping cost.

NOTE: Before purchasing, confirm that all products contained in the pack are appropriate for your destination and that products have a shelf-life that conforms to the recipient country's regulations.

Do not under-appreciate the potential for downstream effects of any donation or gift, both positive and negative. No gift or donation exists in a vacuum; secondary effects are unpredictable.

Resources and Further Reading

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