

Title: A Rural General Surgery Resident's Guide to Volunteering Internationally

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Abstract:

International healthcare delivery shares many challenges and similarities to that of rural institutions across the United States. Patients live in isolated and remote locations and heavily rely on tertiary centers. Surgeons frequently perform procedures outside the realm of their direct training, including Caesarean sections, endoscopies, and urological interventions. Despite this overlap in experiences, trainees from rural residencies face hurdles in training with and learning from their international counterparts, including a lack of dedicated global surgery infrastructure and fellowship research year. Additionally, faculty and co-residents are less able to support international opportunities as the surgical burden of disease remains overwhelming in rural America.

Sharing my personal experiences and research navigating these challenges, I would like to address some strategies and resources that can allow surgeons from rural programs to serve internationally, including:

1. Joining national committees with a shared interest in Global Surgery, such as the RAS Global Surgery Workgroup and the Association of Academic Global Surgery
2. Networking with program attendings and mentors
3. Engaging with programs that do offer Global Surgery Fellowships or Centers for Global Surgery

This talk will be of interest and relevant to those who train or work where there is a limited precedent to support staff who are interested in global surgery. Historically, global surgery was not considered to be one of the pillars of global health, but currently, 5 billion people lack access to surgical care and the burden of surgical conditions is almost twice the combined burden of TB, HIV, and malaria. The learner should be able to describe the global burden of surgical disease, identify organizations that can help provide international opportunities, and determine networking avenues to share pathways to successful initiatives. The audience of this talk will be more equipped to pursue an interest in global surgery after listening to this presentation.

References:

Bath, M., Bashford, T., & Fitzgerald, J. E. (2019). What is 'global surgery'? Defining the multidisciplinary interface between surgery, anaesthesia and public health. *BMJ global health*, 4(5).

Meara, J. G., & Greenberg, S. L. (2015). The Lancet Commission on Global Surgery Global surgery 2030: evidence and solutions for achieving health, welfare and economic development. *Surgery*, 157(5), 834-835.

Debas, H. T., Donkor, P., Gawande, A., Jamison, D. T., Kruk, M. E., & Mock, C. N. (Eds.). (2015). *Essential Surgery: Disease Control Priorities, Third Edition (Volume 1)*. The International Bank for Reconstruction and Development / The World Bank