

NHS Scotland Global Citizenship Doing It Well



Acknowledgements

The NHS Scotland Global Citizenship Guide ‘Doing It Well’ was updated in 2026 with input from the NHS Scotland Global Citizenship Lead Champions. It builds on the excellent resources and toolkits available which we have acknowledged in the Guide. It is a working document that we will continue to add to and build on, using the experience and learning from our colleagues involved in global citizenship.



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Introduction

The NHS Scotland Global Citizenship Guide provides advice and guidance for NHS Health Boards and staff about how to get involved in Global Citizenship.

Most of the advice and guidance contained within the Doing It Well Guide is also contained in our two Global Citizenship eLearning modules, which are available on [Turas Learn](#).

This includes advice on how we can help from home, and if volunteering overseas, what needs to be considered in terms of risk assessment, safeguarding and maximising the impact of our commitment, guiding staff towards building sustainable partnerships and relationships which deepen and strengthen with time.

This guidance should be used together with contextually specific information and professional advice.

[The NHS Scotland Global Citizenship Framework](#) sets out ten Principles which underpin the NHS Scotland Global Citizenship Programme and the direction for global citizenship in NHS Scotland.

These Principles detail ‘what good looks like’ and support NHS staff and Health Boards to ensure the global health work they undertake with partners is ethical, sustainable and effective.

The Framework makes clear NHS Scotland’s ongoing commitment to global citizenship, for the benefit of patients, health workers and the health service both here in Scotland, and beyond.



Section 1 – What is Global Citizenship?



There are several definitions of Global Citizenship, all expressing the following broad sentiment:

“Global Citizenship describes a sense of belonging to a larger global community. It is about recognising that every person is a citizen of the world and that we all have responsibilities to each other and to our planet.

It’s about understanding and appreciating diverse cultures, perspectives, and ways of life and the need to be better informed and engaged in both local and global issues – working together with others to help build a better world for everyone.”

Source: [IDEAS](#)

Why get involved?

Many NHS staff want to contribute to global health in low- and middle-income countries because they want to be part of making a positive contribution overseas and develop their skills. The motivations are multiple, but a common theme is the recognition that access to healthcare is a human right and that many people possess the skills in demand to help alleviate the gaps.

Exercise: As a starting point it’s worth asking yourself why you want to get involved in global health.

Some possible answers:

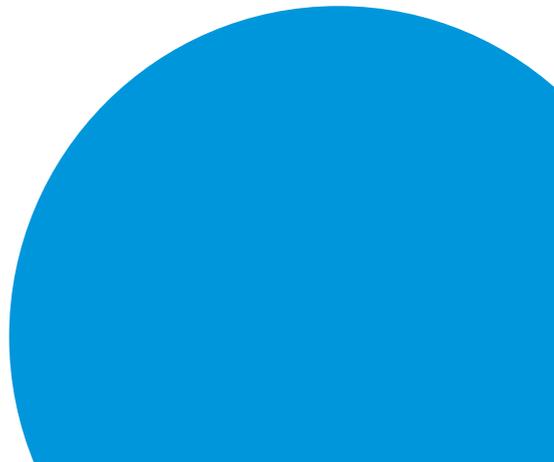
- I have skills that are matched with the needs
- I am a good teacher and can share my skills and knowledge with others
- I am an experienced engineer/technician/data analyst/water engineer and I can share my skills and knowledge
- I am interested in developing my skills and knowledge and interested in meeting new colleagues and building collaborative partnerships
- I am thinking about retirement and I have always wanted to see if my skills and knowledge can help
- I want to do research and contribute to global health in this way

Benefits of getting involved in global health work

There is clear evidence that involvement in global health benefits the people who participate, our healthcare system, and ultimately the Scottish population through a reinvigorated, self-sufficient, innovative and productive workforce.

Evidence for the mutual benefits of global health work can be found in the academic literature and in the experience of health systems that have combined the development of global health work with training and service delivery. Benefits to individuals include developing:

- leadership and management skills
- communication and teamwork
- clinical skills
- policy awareness and experience
- academic skills
- patient experience and dignity
- personal resilience, satisfaction and interest





Case Study: Jacqui Doran, Scientist, NHS Lothian, who volunteers with a small charity that has a cervical cancer screen-and-treat programme in Guyana, South America

Our cervical cancer screen-and-treat programme in Guyana, South America has grown from strength to strength over the years. We are now a small charity called Remote Health Outreach Guyana (RHOG) made up of mainly Guyanese volunteers with the occasional overseas volunteer, who are most welcome. Our modality of screening has changed over the years and currently we use self-sample HPV testing as our primary screening method, keeping in line with the country's vision and WHO screening recommendations.

We have added a breast cancer awareness campaign and still continue to provide dental services, which is the most popular outreach service. The photo above shows children's hands after dental triage. A smiley face means they have to see the dentist. This work keeps us all busy even outside of the bi-annual expeditions – there is so much organisation involved from a variety of volunteers. The expeditions are fun, tiring, challenging but extremely worthwhile. My work in Guyana keeps me grounded, refreshed and resourceful as an NHS employee and keeps me grateful for having our NHS here in Scotland.

I am reminded of how fortunate I am to have had opportunities made available to me that have resulted in the person I am today.

The high cervical cancer rate in Guyana's interior makes me an advocate here at home for our successful NHS cervical screening programme too.

Benefits to NHS Scotland and the Scottish Population

Working in low-and middle-income countries often enhances clinical expertise as a result of working in a setting with fewer diagnostic resources. This makes us better equipped to adapt to transformation and change in NHS Scotland.

The Scottish population is diverse, and we benefit greatly from staff with cross-cultural experience, awareness and understanding. The experience can also help stimulate innovation and learning through experience of different models of care and healthcare systems.

Benefits to NHS Scotland include:

- enhancement of recruitment and retention
 - system learning and capacity building
 - professional development of the workforce
 - improved patient experience
 - reputational development
- 

Safeguarding and ‘Do No Harm’

International development and humanitarian assistance involve working with the most vulnerable people and it is critical that no harm is done. This includes harm which is not intended. The international development sector has been quick to act following the heightened media attention early in 2018 on abuses that had taken place during the delivery of humanitarian work. This intense scrutiny has put pressure on governments and international development organisations to demonstrate that they have robust safeguarding policies and procedures in place. All NHS Scotland employees who participate in Global Citizenship are reminded that they are required to continue to meet the [NHS Scotland Code of Conduct and Scottish Government Statement on Safeguarding for international development work](#).

[Safeguarding Support Package](#), ‘Safer for All’ has been developed by Scotland’s International Development Alliance (SIDA) and designed specifically to provide information, tools, and resources and support needed to ensure that safeguarding practice meets the highest standards.

Scotland’s International Development Alliance (SIDA)

[Scotland’s International Development Alliance](#) provides support to people and organisations in Scotland involved in international development. SIDA provide a range of resources including education and training as well as access to a comprehensive funding database.

Scotland Malawi Partnership (SMP)

If you have an interest in Malawi, the [Scotland Malawi Partnership](#) (SMP) is the national civil society network co-ordinating, supporting and representing the people-to-people links between our two nations. The organisation represents a community of 109,000 Scots with active links to Malawi.

The SMP is a membership organisation which anyone in Scotland with an interest in Malawi can join. It is a non-governmental and politically neutral member-led organisation. Its sister organisation, [Malawi Scotland Partnership \(MaSP\)](#), is a Malawian-owned and Malawian-led network which exists to support and develop Malawi's many civil society links with Scotland, thereby enhancing the cooperation between Malawi and Scotland Government on one hand and the North and South on the other.

Scotland Zambia Partnership (SCOZAP)

If you have an interest in Zambia, [the Scotland Zambia Partnership \(SCOZAP\)](#) is the diaspora-led organisation with membership of around 500 Zambians and friends of Zambia. SCOZAP is a membership organisation which anyone in Scotland with an interest in Zambia can join. It is a non-governmental and politically neutral member-led organisation.

Section 2 – Getting Involved



Active Global Citizenship

Everyone can get involved in active global citizenship by making the connections between our day-to-day decisions at home and the potential impact these choices have on people who live in low- and middle-income countries. This awareness enables us, as individuals, to do what we can to promote social justice.

Case Study: Emily Broadis, Consultant in Public Health Medicine, NHS Ayrshire and Arran, Active Global Citizen

Living and working in Malawi opened my eyes to inequality, resourcefulness and living in the present, and the friendships I made mean that poverty is no longer faceless. I think for me, active global citizenship is the explicit recognition that the way I live, through consumer and lifestyle choices, work and volunteering, can make a difference to those who are disadvantaged, and it brings a hope that both peoples' lives, and planetary health, can be made fairer and healthier.

Traditionally global health work, has been considered through the lens of overseas volunteering. However, staff from across the NHS contribute to global health in multiple and innovative ways including:

- mentoring healthcare staff from low- and middle-income countries who come to work in NHS Scotland to develop new skills and learning
- providing remote support including: virtual learning, clinical networks, coaching and mentoring using a wide range of technology from Scotland to staff in low- and middle-income countries
- providing additional cover and support when a team member is volunteering overseas
- fundraising to support local and global initiatives
- voluntary work within Scotland to support refugees/asylum seekers
- supporting healthcare system development in a low- and middle-income country with skills, experience and tools in areas such as project management, financial management and quality improvement

For further information please see the [Active Global Citizenship](#) resources which includes thinking about our everyday choices and the impact these may have on others.

Environmental Sustainability, Climate Change and Global Health

One of the natural consequences of becoming a Global Citizen is being someone who makes an active contribution to local and global sustainability.

But what do we mean by ‘sustainability’, especially as it seems to mean different things to different people and organisations? Being sustainable simply means that things can be maintained at an agreed level or rate, usually of a given resource or resources. So, financial sustainability means that we are seeking to maintain the use of funding at an agreed level or rate, staffing sustainability means that we are training and recruiting the staff necessary to maintain services, and environmental sustainability means that we are using environmental resources in a way that maintains the integrity of our environment. When we consider global health, we are usually considering the ways in which we actively support the development of health and healthcare systems in a sustainable way.

Sustainable development has been described by the United Nations as:

“development that meets the needs of the present without compromising the ability of future generations to meet their own needs.”

Source: UN. [The Sustainable Development Agenda](#)

Linked to this overarching commitment are seventeen sustainable development goals (SDG) that make clear the actions that are necessary. When it comes to environmental sustainability and climate change in the context of global health, the necessary actions encompass:

[SDG 12](#) Responsible consumption and production: ensure sustainable consumption and production patterns

[SDG 13](#) Climate Action: take urgent action to combat climate change and its impacts

[SDG 14](#) Life below water: conserve and sustainably use the oceans, seas and marine resources

[SDG 15](#) Life on land: sustainably manage forests, combat the spread of deserts, halt and reverse land degradation, and halt biodiversity loss

For those involved in developing and delivering Scotland's global health response, it can be hard to see how such goals can be delivered practically. Even in Scotland, they can seem very distant from what we are all doing on a day to day basis. But this is why being a Global Citizen is so important.

In Scotland we are fortunate that our [national performance framework](#), which sets out how Scotland will make the SDGs locally relevant, has sustainability as one of the outcomes. This means that by supporting what the NHS is doing locally in relation to sustainability, you are becoming a Global Citizen in Scotland. But more importantly, by becoming aware of, and acting to take forward the [NHS Scotland Sustainability Action](#) programme locally, you will be developing the practical day to day skills that mean you will be practicing in a more sustainable way when working as part of a global health initiative.

To help you get started, your local NHS intranet should be able to guide you to your local Sustainability Action contacts.

Minimising the environmental effects of global health work

There can be a real conflict within global health partnerships between working towards improving the health of our populations, and contributing to the climate emergency by flying people across the world.

This topic is explored in more detail in our second eLearning module, Global Health Work: good quality, ethical and effective. The main recommendations from the discourse around the carbon footprint of partnerships are:

- **avoid premium class travel:** travelling in business class generates roughly three times the carbon of travelling in economy class, and in first class roughly four times. It is important to minimise the carbon generation of our global health travel (as climate change is disproportionately affecting low- and middle-income countries)
- **prioritise telehealth and virtual education:** clearly it's better for the planet if we don't need air travel at all. Many partnerships are now using a hybrid model where some teaching and other support is done remotely using the internet. This has been much easier since the COVID-19 pandemic
- **avoid short trips:** the carbon impact of an international trip is reduced (per day) as the trip gets longer. Therefore the recommendation is that longer visits and placements are better than short (less than around two weeks) ones
- **develop partnerships closer to home:** less air travel is better for the planet, and therefore developing partnerships closer to home will reduce the air miles. In addition, supporting South-South partnerships and addressing health inequalities in your own country or area is another way to minimise air travel

Reference: Can J Anaesth. 2023 Jan 20;70(3):327–334.

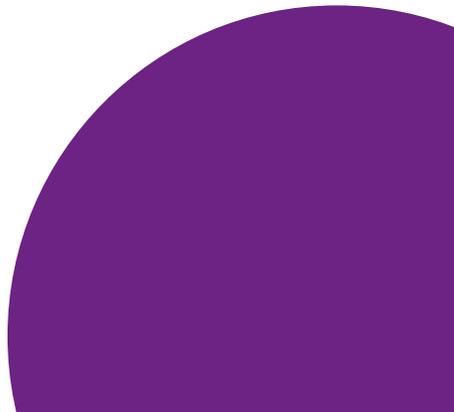
Building Collaborative Health Partnerships

Health partnerships are a model for improving health and health services based on ideas of co-development between people and institutions from different countries. The partnerships are long-term but not permanent and are based on ideas of reciprocal learning and mutual benefits.

Whether you decide to volunteer with a charity or as part of a health partnership, your input should be based on collaborative working and follow the principles of [Global Health Partnerships \(GHP\) – Principles of Partnership](#).

Health partnerships take many forms; they can be an arrangement between friends, colleagues, organisations, charities or NHS Boards. However, fundamental to any partnership is that they have been developed collaboratively and are based on need.

NHS Scotland recommends that all NHS staff engaged in health partnerships embrace Global Health Partnerships' Principles of Partnership. This can be done prior to establishing a partnership, or established partnerships can be reviewed regularly to check that these principles are embedded in everything that they do.



Global Health Partnerships' Principles of Partnership:

- 1. Strategic:** Health Partnerships have a shared vision, have long-term aims and measurable plans for achieving them and work within a jointly-agreed framework of priorities and direction.
- 2. Harmonised and Aligned:** Health Partnerships' work is consistent with local and national plans and complements the activities of other development partners.
- 3. Effective and Sustainable:** Health Partnerships operate in a way that delivers high-quality projects that meet targets and achieves long term results.
- 4. Respectful and Reciprocal:** Health Partnerships listen to one another and plan, implement and learn together.
- 5. Organised and Accountable:** Health Partnerships are well-structured, well-managed and efficient and have clear and transparent decision making processes.
- 6. Responsible:** Health Partnerships conduct their activities with integrity and cultivate trust in their interactions with stakeholders.
- 7. Flexible, Resourceful & Innovative:** Health Partnerships proactively adapt and respond to altered circumstances and embrace change.
- 8. Committed to joint learning:** Health Partnerships monitor, evaluate and reflect on their activities and results, articulate lessons learned and share knowledge with others.
- 9. Embed equity and inclusion:** Health Partnerships consider unequal power relations and inequalities experienced by individuals as a result of their social identities and take action to ensure equity and inclusion are embedded in their work.
- 10. Committed to Climate Action:** Health Partnerships proactively contribute to climate change adaptation and mitigation.

Source: GHP's Principles of Partnership

Case Study: Niall Campbell, Consultant Liaison Psychiatrist, NHS Borders reflects on the NHS Borders Health Partnership with St Francis Hospital, Katete, Zambia

As Chairman of [Logie Legacy](#), I visited St Francis Hospital in Katete, Zambia, to review our ongoing work there. As a Psychiatrist and a GP, I was interested in the interplay between physical and mental health. I witnessed first-hand the scale of unmet mental health need, limited access to treatment, and the wider challenges of inequality, rising gender-based violence, and teenage pregnancies, and continued stigma around mental health. These pressures place significant strain on already limited health services. One of our aims is to enable mental health care not just within hospital but bringing it into communities reiterating the message ‘no health without mental health’.

Our partnership with St Francis Hospital has demonstrated the value of true bidirectional learning, with shared ideas, mutual support, and renewed motivation for UK staff who have felt demoralised or demotivated. The engagement with Zambia has brought a renewed sense of purpose and perspective for staff, which has included staff from catering, admin and clinical staff. The collaboration reinforces how global partnerships strengthen both local care and professional development.

This visit reinforced key lessons: mental health remains under-resourced globally, health is shaped by social determinants, and long-term global partnerships deliver meaningful, shared impact for patients, staff, and systems alike. There is strength in partnership and we continue to make a difference.

Brave Muleya, Clinical Officer in Psychiatry at St Francis Hospital, reflects on the partnership’s impact: “The support we receive from Logie Legacy allows us to feel confident in seeing and treating the most vulnerable patients in our community. The partnership has allowed mental health to be visible, and has broken down barriers to access and reduced stigma. It means so much to us.”



Engaging with a Health Partnership

If you are looking to get involved in global citizenship, as a first step, you can get in touch with your NHS Board's Global Citizenship Lead Champion who will endeavour to guide you to further information and local staff involved in global health work. This can be helpful in thinking about the different ways you could contribute and also if there are any opportunities locally to get involved in your Board (to find out who your Lead Champion is, email ScottishGHCU@gov.scot).

You can also search the [Health Partnership Map](#) which will give you an idea of the different health partnerships that are underway and an idea of what is involved and how your skills and interests could contribute. Many of the partnerships on our website also have links to their own websites and publications which can also help you to familiarise yourself with their work.

If a local partnership is involved in work outside of your field, it can still be worth having a conversation with the partnership leads. Many partnerships evolve as a result of local interest and expertise as well as the needs expressed by host organisations.

Health Partnership Toolkits

Global Health Partnerships has several excellent resources that could help you as an individual in setting up governance arrangements for your new partnership:

- [Principles of Partnership](#)
 - [International Health Links Manual](#)
 - [Example Memorandum of Understanding](#)
 - [Students in Partnerships](#)
 - [Duty of Care Guidance for health partnerships](#)
- also includes advice on insurance, indemnity and visas etc.

Health Partnership Programme

In July 2025, reflecting its ongoing commitment to global health equity, the Scottish Government launched its flagship new Health Partnership Programme, funded from the Scottish Government International Development Fund. This programme builds on Scotland's 20-year legacy of international development, drawing on the Scottish Government's strengths in health and education and deep-rooted relationships with partner countries to drive equitable, sustainable improvements in healthcare.

Always aligned with, and building on the success of the NHS Scotland Global Citizenship Programme, this Scottish Government initiative will, through partnership working:

- [support](#) health partnerships between health institutions in Scotland, Malawi, Rwanda and Zambia – promoting bidirectional learning, mutual benefit and the exchange of skills and knowledge
- mobilise the power of international collaboration to strengthen health systems across Malawi, Rwanda, Zambia and Scotland
- provide opportunities for healthcare professionals to share skills, experience and knowledge across borders — improving health for all

Global Health Partnerships were appointed in 2025 as Fund Managers for the first phase of this new Programme, taking forward funding calls for proposals and managing the grants, working closely with the Scottish Government international development team. More information to be found on this webpage: [Introducing the Scottish Government Health Partnership Programme \(SGHPP\) – Global Health Partnerships](#).

Measuring the effectiveness of what you are doing

Working out what you will have achieved in what you do is really important. Have I ‘made a difference’? Before you start, think about how you could measure what you do and have some plans in place beforehand. This should be kept very simple – large evaluations of programmes have their place but they are difficult to do and expensive.

If you are teaching, for example, could you use ‘process measures’? Getting formal feedback on your teaching and assessing knowledge change before and after are easy to do. Assessing changes in practice (for better or worse) in the group you are working with is something that will allow you to further develop or to modify what you are doing. Online questionnaires such as Survey Monkey can be really helpful – but you need to really encourage people to complete them.

Think about how the work you do could be replicated over a longer period. Keeping any good intervention going over a period time or repeating it on a regular basis is bound to be more effective than something that is one-off.

Helpful Tips

- explore the current local data which is owned by the Ministry of Health in the partner country and ask questions about: what data is collected (patients/services/procedures/outcomes)? Who collects the data? How is it stored and used?
- consider the monitoring and evaluation plan prior to setting up the project or partnership. Can data which is already being collected contribute to this? Will your hosts be able to use currently collected data to evaluate this project? Try to avoid establishing parallel data capturing methods but rather consider how this project might strengthen current strategies in place
- if appropriate, consider offering support to build professional capability in the field of data capture

Quality Improvement Zone

In planning the sustainability of the health partnership you are involved in, the [Quality Improvement Zone](#) provides information and resources to support people with experience at all levels of quality improvement to develop their knowledge.

In the QI Zone you will find:

- information on what is quality improvement, the improvement journey and related quality improvement tools and topics
- a range of educational resources, including eLearning modules, guides and frameworks
- information on the different levels of experience in quality improvement and associated learning programmes

Quality Improvement Journey



Knowledge and Evidence

Encouraging evidence-based practice is a key part of quality improvement. [HINARI](#) is a global initiative which provides access to high quality, up-to-date health research evidence and decision-ready evidence summaries for use at point of care. These are free of charge to local and not-for-profit institutions in low- and middle-income countries. Training materials are available at [research4life](#).

Volunteering with a Charity

Another way to volunteer overseas is to go with a charity. [There is a list of organisations which provide volunteering opportunities on our website](#). The Scottish Global Health Co-ordination Unit is not specifically recommending these organisations but rather providing you with a starting point to begin to explore the different opportunities that might be of interest to you.

If you are interested in volunteering with a charity or an organisation, we suggest that you research the organisation, the work and country that they are working in, and whether they have processes and support in place for collaborative partnership working, and ethical volunteering, including Safeguarding and Conduct.

If you choose to volunteer with a charity or organisation – here are some questions that you should consider:

- what is the vision of the organisation?
- is the work community led, i.e. based on the needs of the community?
- do the organisation's values resonate with your own?
- is the organisation's vision based on social justice or charity?
- how is the organisation funded and is this transparent?
- is there a safeguarding policy and is training available?
- who has overall accountability for the project?

Medical Equipment and Other Donations

If you are working as part of a health partnership, your host partners may identify medical devices and equipment that are needed. Medical equipment has become a fundamental part of modern healthcare delivery giving health professionals throughout low- and middle-income countries the tools they need to deliver quality care, enabling screening, prevention, diagnostics, treatment and palliative care.



Although most donations are made with good intentions, the donation of medical equipment is complex and dealing with donated goods comes with risks and difficulties to both the donor and the recipient. If poorly executed, donations can burden the recipient, wasting an enormous amount of money, human resources and time, with long term implications of crippled healthcare systems and amassing environmental burden, for example, the WHO estimates that up to 70% of donated equipment is non-operational.

The following main barriers to effective donations of medical equipment have been identified:

- lack of collaboration and understanding between donors and recipients
- poor alignment with local needs and infrastructure, including power supply and available consumables
- limited support for long-term use, such as training, maintenance, and integration
- inadequate documentation and language accessibility for equipment use and servicing
- weak coordination and accountability, with no tracking or impact assessment

The 10 Step Guide

If you or your partnership is considering donating equipment, follow the 10 Step Guide which has been designed to support you and your partner through the important considerations to making a safe and effective donation. There is also a [checklist](#) to support you to work through the Guide. Although the Guide focuses on the donation of medical equipment, the key messages are also applicable to other types of donated equipment, e.g. consumables, rehabilitation and therapeutic equipment.

The [Scottish Global Health website](#) signposts a range of good practice resources to help evaluate whether or not to donate and how to do so effectively from start to installation to ongoing support. There is a section in the eLearning module – Global Health Work – that covers safe medical equipment donations. To access it, sign up for a [Turas account](#).

Do you know about Warp-it?

NHS Bodies and Charities can [register for Warp-it](#) where they can search for public sector bodies and connect with them to share unneeded resources, information and promotional tools, e.g. posters which you can use.

Humanitarian Support

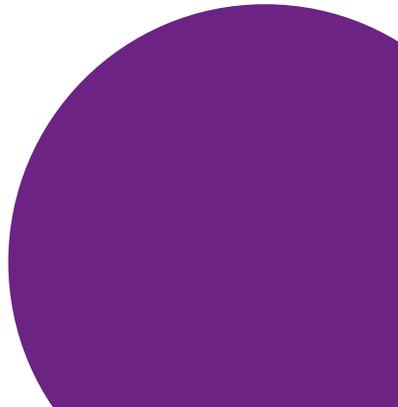
For information on giving humanitarian aid in a crisis please see the [Ready Scotland website](#).

Books and journals

Donations of books and journals should be carefully considered. Healthcare knowledge changes rapidly and needs to be appropriate to the context where it will be used.

Some key principles in selecting materials to send are:

- resources should be up to date – outdated information is often irrelevant and can be harmful. For books, 10 years is usually a maximum cut-off point, and for many aspects of healthcare the pace of change means that five years is more realistic
- resources should be relevant to the priorities and the context where they are to be used. Resources based on processes, systems and devices used principally in high-income countries are less likely to be useful in low- and middle-income countries
- digital access – printed journals date rapidly and are largely replaced now by digital access through resources such as [HINARI](#) – available free of charge to local, and not-for-profit institutions in low- and middle-income countries
- logistics – consider transportation methods, associated costs and assurance that resources will reach their intended destination



Section 3 – Preparing for Going Overseas



If you decide that you want to participate in global health work that involves going overseas, you should give careful consideration and planning to the following areas:

What do you hope to achieve?

In order to make the most of the time you have in country it is important that you discuss and agree your objectives and expectations with your host.

Asking for leave from work

Speak with your line manager as early as possible to discuss your global citizenship plans. Your line manager will be able to discuss ways in which they can support you including referring you to the different HR policies that are available including: annual leave, paid or unpaid special leave, study leave etc. Read the [NHS Scotland Global Citizenship HR Guidance](#), which provides information on current HR policies to support your global citizenship participation.

Financial Implications

Work out how much the trip will cost you (if not covered by an organisation).

- Travel
- Travel insurance
- Time off work if unpaid
- Visas
- Health costs such as vaccines and anti-malarial medication
- Accommodation and within country travel
- Are you a caregiver, if so, who will undertake these roles when you are away? Will there be extra costs as a result?
- If you are volunteering for a longer time, will this have implications for your pension?

Family

Things to consider:

- are you using holiday time which you would normally spend with your family to volunteer overseas, will this have implications for their holiday?
- are you a caregiver, if so, who will undertake these roles when you are away?
- discuss with family and friends early – are there any big events or occasions that you may miss?

Professional Registration

If you are planning to undertake clinical work, most countries will require you to be professionally registered with the local national professional council or equivalent regulating body. The Global Health Co-ordination Unit recommends that you register with the national professional council. This shows respect for national institutions and builds capacity within these institutions. The institution or facility where you will be working will be best placed to advise. Alternatively, if you are working with a charity or organisation they will be able to advise.

The [General Medical Council \(GMC\)](#), [Nursing and Midwifery Council \(NMC\)](#) and [Health and Care Professions Council \(HCPC\)](#) websites provide contact details of most overseas regulators.

Professional Indemnity

Whether you plan to work as part of a health partnership or with a charity or organisation you should ensure there is clear policy and guidance to specify where the responsibility for indemnity lies. Professional indemnity provided by [CNORIS \(Clinical Negligence and Other Risks Indemnity Scheme\)](#) is unlikely to cover overseas work so it is important that you arrange and pay for your own appropriate insurance cover. If you are responsible for your own cover, you can contact your usual provider to check what is required. The major UK indemnity providers do not generally provide cover outside of the UK, Australia and New Zealand. The institution or facility where you will be working will be best placed to advise.

In some cases, volunteers have been able to obtain professional indemnity at a cheaper rate by indicating that they are going to work in a low- or middle-income country. If working with a Health Partnership or a Charity they should be able to provide a covering letter to help facilitate this.

Travel Insurance

You will need reliable, comprehensive travel insurance if going overseas. Make sure that it includes cover for pre-existing medical conditions.

Handy Tips:

- save the emergency contact number and policy number in your phone
- share the insurance policy with a colleague who is travelling with you and with your emergency contact at home
- email the insurance policy to yourself or store remotely in case you lose your devices

Travel Deals

There are opportunities in the travel industry to secure cheaper/flexible fares for travellers flying for humanitarian purposes. Some travel agencies have negotiated humanitarian fares with major airlines.

What are Humanitarian Fares?

While not always the cheapest they are always the most flexible. They offer a larger allocated amount of baggage; they often have a large hold period (about 11 months) where you can hold the flight you want before booking and you can change or cancel the flight after your final booking for a small fee. For some agencies, you don't have to pay any transaction fee for booking a humanitarian fare.

Travel Advice

The best way to get objective, specific and up-to-date travel advice for the country you are planning to visit is to consult [the Foreign, Commonwealth and Development Office \(FCDO\) website](#). If you don't follow the advice from FCDO it can invalidate your travel insurance.

Complete the [foreign travel check list](#) early in the planning stage of your trip, this includes entry requirements and visas, and advice about driving.

If travelling to more high risk destinations or for longer periods, you should register your presence in country with the UK Embassy or High Commission. This will enable them to reach you if there are any situation changes.

Living Arrangements and Lifestyle Restrictions

It is worth bearing in mind that working with overseas organisations may involve basic living arrangements alongside undertaking similar work. Other potential restrictions on personal freedoms may include alcohol consumption, style of dress, travelling at particular times or to certain locations, personal relationships and limited choices regarding diet.

In some countries it may be difficult to find somewhere safe to run or cycle or you may work during daylight hours and it is unsafe to exercise after dark.

Consider the following:

- find out about your living arrangements during your planned time overseas if these are being arranged for you
- are there any conventions regarding dress?
- if you regularly exercise, will this be possible while overseas?
- what are the local conventions on consumption of alcohol?
- if you have any dietary needs, such as gluten free or vegan, will the place you are staying be able to cater for these?
- check internet connectivity with your hosts, before travel. It may be cheaper to buy a local sim card rather than using your UK number

Knowing Your Environment

You can familiarise yourself with the country you are going to with the [World Health Organization country guides](#).

Case Study: Paul Gowens reflecting on preparing for first visit to Zambia.

I had lots of experience in Emergency Medical Systems (EMS) internationally, in high income countries, so preparing for visiting Zambia, for my first time, was both exciting and daunting.

The most important part of my preparation was, 1) linking with colleagues at home who had in-country experience, and 2) connecting with key contacts in Zambia prior to travelling. This was so important in terms of building collaborative relationships and also from a health and wellbeing perspective so I didn't feel isolated when in country.

I can't emphasize enough how important it is to thoroughly prepare before travelling. Planning who and where are you going to, making sure you have your vaccinations and immunisations, handy things like keeping copies of vital documents such as passport, yellow fever card and insurance. Also important to think about how you will get about and what accommodation you are going to be staying in.

My visa needed to be paid for in US dollars on arrival at the airport, Kwacha as Zambian Currency can't be taken into the country.

Many meetings can be ad hoc and once people know you're there they will be very keen to meet with you. You have to be prepared to arrive with a very flexible itinerary.

I used WhatsApp as my primary communication method so having a sim card, data and WhatsApp are vital as soon as you arrive.



Immunisation

Travel vaccinations are now provided by regional NHS travel health services. Contact your local health board to book a travel health risk assessment, ideally 12 weeks before travel. [NHS Inform](#) can be contacted for more information. You can also contact a private travel clinic. Free NHS vaccines may include diphtheria/polio/tetanus booster, hepatitis A, typhoid, and cholera. Additional vaccines if needed are not free, and a traveller must pay for them, e.g. rabies, yellow fever. Anti-malarials also have a cost.

Some countries may have entry requirements which include evidence of having been vaccinated against some conditions such as yellow fever. Check the entry requirements on the [Foreign Travel Advice](#) site.

If you have a complex itinerary, underlying medical problems or are undertaking work in countries with a substantial risk of HIV transmission, you should consider seeking travel health specialist medical advice specific to your situation. This should include a discussion about post-exposure HIV prophylaxis.

Your local Occupational Health Department will be able to ensure that routine NHS vaccinations and immunisations such as hepatitis B have been given and are adequate (all clinical NHS workers should be vaccinated and checked by Occupational Health) and discuss issues around TB.

[The Travel Health Pro website](#) provides advice by country.

Checklist

- ☑ Do you need vaccinations?
 - ☑ Do you need anti-malarial medication?
 - ☑ Do you have any long term medical conditions?
How will these be followed up?
 - ☑ Do you have enough medications to cover your trip?
 - ☑ How and where will you access emergency healthcare?
 - ☑ What is the healthcare structure?
 - ☑ Do you have travel insurance to cover all settings and activities?
It is important to note that some insurers will not cover infectious diseases contracted while working.
- 

Looking after your Emotional Resilience

How you will cope working and living in a different country is a question you need to consider when contemplating undertaking volunteering in resource-poor environments. Sometimes language barriers, cultural differences or experiencing extreme poverty for the first time can have a profound effect on your wellbeing. Here are some steps you can take to prepare:

Consider the impact of living away from your home and family on your mental health, especially if you are going to a remote area and have never lived abroad before. You may find yourself feeling lonely or stressed. It is important therefore to have a good support structure, in your new country and at home, that you can turn to if you need help. Consider networking with other volunteers in the area for peer support.

Steps you can take:

- speak to previous volunteers and NHS Board Champions who have worked in the country you are planning to travel to
- invest in a good guide book and research cultural information
- learn some important phrases in the local language
- try to stay open-minded and not have too many preconceptions about the place you are planning to work
- make sure you have an emergency contact in country and at home should you need it for any reason
- during your visit, plan how you will communicate with your hosts on your return, consider what method of communication will be most convenient and cheapest for them, what time of day will fit with your and their schedule best, taking into account time zones

Section 4 – Risk and Security



It is important to assess the risks you might face when you go to work abroad and consider if you are happy to accept them. The [Foreign, Commonwealth and Development Office \(FCDO\) website](#) has a five step approach to risk mitigation in their Duty of Care toolkit – see below.

Risk is the extent to which we are vulnerable to threats. Threats may relate to security, health and safety or legal issues and although they cannot be influenced, vulnerability to them can be reduced.

Five Steps to Risk Management:

1. Identify existing threats

Threats are external factors which may result in harm, injury, loss or damage to an individual, programme or organisation. A context assessment can be used to identify threats, looking at the political, social, economic and cultural background of a particular environment. This can be informed by previous visits or through partner discussions or research. While it is highly recommended to consult the Foreign and Commonwealth and Development Office (FCDO) website, local knowledge about the situation on the ground is also invaluable.

2. Look at patterns and trends

The nature of threats is likely to change over time and it is important to understand why in order to fully assess the partnership's vulnerability to them.

3. Assess vulnerability

While threats are external factors, vulnerability is about exposure to, or the likelihood of encountering a threat. It can be managed internally and as vulnerability is reduced, so too is the risk. Within this step, look at factors affecting exposure to threats and identify those which are priorities. It is also important to identify your risk tolerance, which risks are acceptable and which need to be actively managed. In order to do the latter, it is common to assign each threat a rating from 1 to 5 pertaining to both its probability and potential impact. Multiplying these ratings together will give an overall Risk Rating out of a total possible 25. The higher the rating, the higher the priority.

4. Identify ways of reducing vulnerability

Reduced vulnerability will be achieved through the development of appropriate risk management strategies, policies and procedures. These should include measures to reduce the likelihood of threats materialising and to reduce the impact of those that do, as well as to transfer or share risk, or avoid it altogether. In all cases, measures should be put in place at both the organisational and individual level as appropriate.

Such strategies might include, but are not limited to, insurance, training, written procedure and checklists.

5. Assess whether the remaining level of risk is acceptable

While risk can never be completely eliminated, it is important for it to be proportional to the expected gains of the partnership. Having completed steps 1 to 4 and adopted appropriate risk management strategies, the partnership should be satisfied that the level of risk remaining is acceptable.

Source: [Global Health Partnerships Duty of Care toolkit](#)



Risk and Security Resources

There are several ways to look for information about crime and security risks in the country you will be working in:

- [GOV.UK](#) gives a good overview of the security risks in different countries in their section on [foreign travel advice](#)
- websites of local embassies provide details about security issues
- the [WHO 2023 Global Status Report on Road Safety](#) gives information on accident statistics around the world

Once in country it is important to know what to do in an emergency so make sure you know the contact details of the local emergency services (if available) or have someone you can contact if you need to. In advance of your journey, contact the local embassy in country to find out how you can register as soon as you arrive as they can provide help and assistance if you need it.

It is crucial to remain aware and alert to your new surroundings. Make sure you are familiar with local customs especially if you are in a country that is very different to where you are from.



Section 5 – On Your Return



On your return home it can take time to readjust. Here are some things that can help:

- keep in touch with the people you met while working overseas, especially in your host community. This is good for your emotional resilience and it is also good to build long term partnerships, your hosts will miss you just as much as you miss them!
- share your experiences with friends, family and other NHS Board Champions
- share the work you were involved in on the [Health Partnership Map Template](#) so that others can learn from your experience
- it may be a stipulation of your leave or funding that you write a report, try and do this in collaboration with your international partners

**Case study: Dr Lesley Crichton,
Consultant Anaesthetist – NHS
Tayside**

Generally, there was a lot of work and admin to do to fit back into our previous lives, and I felt changed as a person, which meant it was harder to slot back into ‘normality’. Professionally, I found it overwhelming at first to be back in a high-income country hospital. The operating theatre in particular felt alien, with so many monitors and bits of equipment, and so much information to process.

It helped to have a gradual return, so that I wasn’t working independently for the first week or so. I was able to remain part of our health partnership both by contributing online and also by returning to visit as often as possible. Getting involved in Scottish global citizenship was also a great way of using the things that I had learned from my time in Zambia, but also of meeting like-minded people. I also think that it’s really important to record the experience somewhere, because it’s amazing how quickly you forget what you did and how you felt. I did this in a variety of ways – I kept a blog whilst in Zambia, and I did a few talks for my colleagues when I returned, which were recorded. I now love looking back at these and reflecting on what an incredible experience it was.



Share your experience and knowledge

On return from your overseas work, you can share your experience and knowledge in the following ways:

- complete the [Health Partnership Map Template](#) so you can share your experience and learning with others
 - [sign up as an NHS Board Champion](#) to link up with other Board Champions
 - write a blog or an article for your local NHS Board intranet (ideally ask your hosts to review before publication)
 - share your experience through presentations for your colleagues and the Global Citizenship Champions Network
 - recognise that it can take time to readjust – talking and networking with other Board Champions can help
 - keep in touch with your partner colleagues
- 

Keep thinking globally and acting locally

Reflect on your time overseas on your return to the NHS. How will your experience shape your future and possibly the future of others?



Annex

There are many resources available on the [Scottish Global Health website](#) such as:

- [A-Z resources](#)
- [Active Global Citizenship](#)
- [Global Citizenship eLearning modules](#)
- [Health Partnerships](#)
- [Medical Equipment Donations](#)
- [Webinars](#)

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