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Kelly Arraf

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Framing Medical Mission Trip:

Decisions with the Code of Ethics for Nurses

Ethical values underpin the nursing profession; for this reason, nurses' decisions and actions should be focused on moral principles (Haddad & Geiger, 2023). The American Nursing Association (ANA, 2015) created nine specific nursing provisions to guide the nursing profession, outlined in the Code of Ethics for Nurses. These provisions are essential to consider when faced with a professional decision or concern, as ethical dilemmas may arise due to the nature of nursing care (Haahr et al., 2019). Add to this that many Christian nurses are also guided in decision-making from a Christian perspective, given that nursing is foundationally linked to the historical roots of Christianity (Biber, 2023). Christian nurses with servant hearts continue to feel the need to volunteer, given that Isaiah 58:10 encourages Christians to "feed the hungry and help those in trouble. Then your light will shine out from the darkness, and the darkness around you will be as bright as noon" (*New Living Translation*, 2015a). In nursing, local and global volunteer mission choices are abundant. One must be thoughtful and use discernment when choosing an organization to partner with, reviewing their mandate and goals before committing. Those unfamiliar with the ethical implications of partnering with a mission organization can find themselves in unfamiliar territory or, worse, with an organization with unethical practices that may exploit the vulnerable populations they profess to serve. The Provisions in the Code of Ethics for Nurses can provide a framework to help guide decisions for novice mission nurses. This paper aims to explore several common dilemmas unique to medical mission trips by using the Code of Ethics for Nurses in guiding decisions for novice Christian nurse volunteers.

Provision 1.1 – Respect for Human Dignity

Medical mission trips often aim to provide services to vulnerable people, including those in developing nations, with limited or no medical services, supplies, medicines, or trained medical personnel. There is often a high trust in foreign medical personnel fostered by a desperate need for help. However, the literature highlights significant concerns regarding some organizations' lack of oversight, vague mission guidelines, and the potential goal of a mutually beneficial relationship with the vulnerable population (Tracey et al., 2022). Trust and care can be eroded if the underpinning of volunteer medical tourism drives the organization's goals. Sullivan (2019) describes medical tourism as the perspective that medical mission work can also be combined with travel and tourism activities, and potentially, the ability of the medical providers to work outside of their scope of practice to gain skills and experience. Medical tourism often offers more benefits to the volunteers than those receiving care. Therefore, organizations that foster medical tourism do not align with the Code of Ethics Provision 1.1 as, by its very nature, these actions do not respect human dignity. It is, therefore, essential to ask questions of the organization regarding its goals and mission and how it will ensure respect for human dignity while on the ground.

Prevision 1.4 - The Right to Self-Determination & Provision 8.1 - Health is a Universal Right

Christian nurses often seek partnerships with mission organizations driven by Christian values and principles, and traveling with a religious organization can be a wonderful spiritual experience for the volunteers. Consideration for Provisions 1.4 and 8.1 is essential when providing care as, fundamentally, people have a right to self-determination and the universal right to healthcare services regardless of their religion, sexual orientation, race, ethnicity, or geographical location. Therefore, it is essential when traveling with an organization professing to

be of a particular religion to ensure that the offering of medical assistance is not used as a potential method of religious conversion (Rzepka, 2024). Asking vulnerable people to convert or to claim Jesus as their Savior should never be used to determine who receives medical services. To uphold Provisions 1.4 and 8.1, those participating in medical missions must not infringe upon people's religious choices, especially given that these people are often under duress and desperate for care; beware of any organization that requires vulnerable patients to convert before receiving medical care.

Provision 3.1 - Protection of the Rights of Privacy and Confidentiality

Medical personnel in developed nations must adhere to patients' rights to privacy and confidentiality, including considerations for autonomy, informed consent, and the right to retract consent without punishment or fear of penalty. It is well understood in developed nations that photos and videos of patients need explicit written consent to be taken, shared or published (Tariq & Hackert, 2023). However, on many international mission websites, scores of photos and videos of patients and families can be found, including those of minors. Mission organizations sometimes publish photos and videos of 'medical case studies' revealing the medical services vulnerable patients have received to share the organization's work and raise funds. Consideration for Provision 3.1 requires that those participating in medical missions' trips adhere to the same strict guidelines regarding patients' rights to confidentiality as they would stateside. This includes refraining from publishing photos, videos, medical information, and patient identifiers on organizational websites or personal social media accounts. When interviewing an organization, nurses should ask questions and determine if the organization's policy on confidentiality aligns with Provision 3.1 and one's beliefs about the right to confidentiality.

Provision 3.4 - Professional Responsibility in Promoting a Culture of Safety

& Provision 4.1 - Authority, Accountability, and Responsibility

Provisions 3.4 and 4.1 require nurses to promote a safety culture and take responsibility for their actions, regardless of where they work. There needs to be a commitment to work within one's scope of practice, which means only providing services for which one is qualified and trained. Working outside one's scope of practice stateside goes against promoting a safety culture, is unethical and may pose legal challenges for nurses (Feringa et al., 2018). The same is true when working abroad. For instance, if a registered nurse is not qualified by their state board of nursing to perform circumcisions, there would be no exception to providing circumcisions to vulnerable patients abroad. Beware of organizations that do not carefully verify the volunteer's credentials and suggest that volunteers may practice outside of their scope. Novice medical mission nurses are responsible for their actions and being aware of their expected duties before agreeing to partner with an organization.

Provision 4.4 - Assignment and Delegation of Nursing Activities or Tasks

Considering Provision 4.4, caution should be taken with an organization that does not carefully consider the goals of mission trips with the skill sets and abilities of the volunteers participating. For instance, a registered nurse who has no training in labor and delivery should not be leading a women's health initiative and delivery of babies on a medical mission. The novice mission nurse should always be upfront about their abilities, knowledge, and comfort levels. Also, be very leery of organizations that claim to be providing 'medical mission services,' but few or none of the staff on the mission are trained or proficient in nursing or medical care.

Further Considerations

By carefully considering the Provisions laid out in the Code of Ethics for Nurses (ANA, 2015) and with prayerful discernment, novice medical missions nurses can ask appropriate

questions and determine if the organization they are considering aligns with not only their scope of practice and skill set but also one's values and beliefs about providing services to vulnerable populations. Christian nurses have a unique opportunity to answer the call for Christ; they can be assured that with diligence, the Holy Spirit can help lead one to a fitting organization. In all decisions as Christian nurses, let us be biblically led, as Matthew 7:12 is clear that one must "do unto others whatever you would like them to do to you. This is the essence of all that is taught in the law and the prophets" (*New Living Translation*, 2015b).

References

- ANA (2015). *Guide to the code of ethics for nurses with interpretive statements: Development, interpretation, and application* (2nd ed.). <https://www.nursingworld.org/practice-policy/nursing-excellence/ethics/code-of-ethics-for-nurses/>
- Biber D. (2023). Persevering in Nursing with Godly Purpose. *Journal of Christian*, 40(2), E12–E13. <https://doi.org/10.1097/CNJ.0000000000001057>
- Feringa, M. M., De Swardt, H. C., & Havenga, Y. (2018). Registered nurses' knowledge, attitude, practice and regulation regarding their scope of practice: A literature review. *International Journal of Africa Nursing Sciences*, 8, 87-97.
doi:10.1016/j.ijans.2018.04.001
- Haahr, A., Norlyk, A., Martinsen, B., & Dreyer, P (2020). Nurses experiences of ethical dilemmas: A review. *Nursing Ethics*, 27(1), 258-272. doi:[10.1177/0969733019832941](https://doi.org/10.1177/0969733019832941)
- Haddad, L. M. & Geiger, R. A (2024). *Nursing ethical considerations*. StatPearls Publishing: Treasure Island, FL. <https://www.ncbi.nlm.nih.gov/books/NBK526054/>
- New International Version*. (2011). Biblegateway.com.
<https://www.biblegateway.com/passage/?search=James+1%3A+17&version=NIV>
- New Life Version*. (2003). Biblegateway.com.
<https://www.biblegateway.com/passage/?search=Proverbs+11%3A+13&version=NLV>
- Rzepka, M. (2024). Protestant medical missions in Iran: Negotiating religion and modernity in mission hospitals. *Religions*, 15(2), 1-15. <https://doi.org/10.3390/rel15020145>
- Sullivan, H. R. (2019). Voluntourism. *American Medical Association Journal of Ethics*, 21(9),

E815-822. <https://journalofethics.ama-assn.org/article/voluntourism/2019-09>

Tariq, R.A., & Hackert, P.B. (2023). *Patient confidentiality*. StatPearls Publishing: Treasure

Island, FL. <https://www.ncbi.nlm.nih.gov/books/NBK519540/>

Tracey, P., Rajaratnam, E., Varughese, J., Venegas, D. Gombachika, B., Pindani, M., Ashborne,

E. & Martiniuk, A. (2022). Guidelines for short-term medical missions: perspectives

from host countries. *Global Health*, 18(19), 1-11. <https://doi.org/10.1186/s12992-022->

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