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**TRAINEESHIP REPORT – RELATÓRIO DE ESTÁGIO**

**Universidade Fernando Pessoa**

**Porto, 2023**



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Assinatura da/o discente / Signature of the student

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Relatório de estágio apresentado à Universidade Fernando Pessoa como parte dos requisitos para obtenção do grau de Mestre em Ação Humanitária, Cooperação e Desenvolvimento, sob a orientação do Professor João Casqueira.

**Universidade Fernando Pessoa**

**Porto, 2023**

## **Abstract**

Climate change is the cause of more and more natural disasters and humanitarian crises of all kinds. Numerous associations are fighting to awaken societies to this cause and make the well-being of all a priority. It is this desire that drives the TOGETHER Network. Thanks to their numerous local actions and in particular to the drafting of a Manifesto and Call for Co-responsibility sent to the Secretary General of the United Nations, in the hope of making this co-responsibility a global priority, the network has an impact in the fight against climate change. Mainly present in Cape Verde within the framework of the Universal Solidarity project, the TOGETHER network brings support and creates international relations to the community associations of this archipelago so that they can sustainably launch their development projects and aid to vulnerable populations.

It is in this search for sustainable development that the question of the sustainability of medical volunteering and its real impact on the populations that benefit from it is also raised.

Keywords: Humanitarian action; Cooperation for development; Cape Verde; Co-responsibility; Volunteer work

## **Résumé**

Le changement climatique est à l'origine de toujours plus de catastrophe naturelle et crise humanitaire en tout genre. De nombreuses associations luttent pour éveiller les sociétés à cette cause et rendre le bien-être de tous une priorité. C'est cette envie qui anime le Réseau TOGETHER. Grâce à leurs nombreuses actions locales et notamment à la rédaction d'un Manifeste et Appel à la Co-responsabilité envoyé au Secrétaire Générale des Nations Unies, dans l'espoir de rendre cette co-responsabilité une priorité mondiale, le réseau a un impact dans la lutte contre le changement climatique. Principalement présent au Cap Vert dans le cadre du projet de Solidarité Universelle, le réseau TOGETHER apporte un soutien et crée des relations internationales aux associations communautaire de cet archipel afin qu'ils puissent durablement lancer leur projet de développement et d'aides aux populations vulnérables.

C'est dans cette recherche d'un développement pérenne que se pose également la question de la durabilité du volontariat médicale et de son réel impact sur les populations qui en sont bénéficiaires.

Mots-clés: Action humanitaire; Coopération au développement; Cap-Vert;  
Co-responsabilité; Volontariat.

## **Resumo**

As alterações climáticas estão a causar cada vez mais desastres naturais e crises humanitárias de todo o tipo. Numerosas associações estão a lutar para despertar as sociedades para esta causa e tornar o bem-estar de todos uma prioridade. É este desejo que impulsiona a Rede TOGETHER. Graças às suas numerosas acções locais e em particular à elaboração de um Manifesto e Apelo à Co-responsabilidade enviado ao Secretário-Geral das Nações Unidas, na esperança de fazer desta co-responsabilidade uma prioridade global, a rede está a ter um impacto na luta contra as alterações climáticas. Principalmente presente em Cabo Verde no âmbito do projecto Solidariedade Universal, a rede TOGETHER apoia e cria relações internacionais para as associações comunitárias deste arquipélago, para que possam lançar de forma sustentável os seus projectos de desenvolvimento e ajuda às populações vulneráveis. É nesta procura do desenvolvimento sustentável que se coloca também a questão da sustentabilidade do voluntariado médico e do seu impacto real nas populações beneficiárias.

Palavras-chaves: Ação humanitária; Cooperação para o desenvolvimento; Cabo Verde; Co-responsabilidade; Voluntariado.

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## **List of abbreviations**

<b>GDP :</b>	Gross Domestic Product
<b>HDI:</b>	Human Development Index
<b>IPU:</b>	Inter-Parliamentary Union
<b>LRRD:</b>	Linking Relief, Rehabilitation and Development
<b>NGO:</b>	Non Governmental Organization
<b>UNDP:</b>	United Nation Development Programme
<b>WHO:</b>	World Health Organization

## **Dedication**

I would like to dedicate this internship report to all the professors and the professionals that I met during my studies. From my bachelor's degrees to my Master's degree. To all the persons who gave me learning opportunities at school or in my professional life. To all the persons that grow on me the passion of humanitarian action, the willing to dedicate my life to others. Finally, I would like to thank Professor Casqueira for helping me so much during my Master year and for this thesis.

*We are way more powerful when we turn to each other and not on each other, when we celebrate our diversity, focus on our commonality, and together tear down the mighty walls of injustice.*

Cynthia McKinney

## **Introduction**

To conclude my Master in Humanitarian Action, Cooperation and Development, I had to complete an internship. After looking for different NGO, I have finally been accepted into the Network TOGETHER, an organization that I know well because we used to work with their methodology during class and already had a conference with M. Thirion, the General Secretary, who was my tutor during the whole period of my internship. In order to complete my internship, I had to work for 300 hours with the organization. According to my tutor and the director of my Master, Professor Casqueira, I was able to manage my schedule to do it in over 5 months, from September 2022 to February 2023. I started working as a Project Officer Trainee in order to support the work of Mr. Thirion, particularly on the Universal Solidarity project. I did various different tasks, I managed to update the website wikispiral, I did translation of meeting reports and others papers into informatics languages to insert them on the website, I did translation of the pages in English, French and Portuguese, I did write with the help of my tutor a newsletter for the partners of Together, I help to organize a Universal Solidarity Webinar and started looking for future partners that could be interested in contribute to the project, I also contribute to the writing of a paper on the Universal Solidarity and I organized meetings with the Cape-verdeans partners to collect more information about their community project for the Universal Solidarity Project. Most of my internship turned around the Universal Solidarity Project, this is a concept that has been launched by Jaciana Caste Silva during the 2<sup>nd</sup> Congress on Humanitarian Action and Cooperation for Development organized by the Network Together. The project is to redefine the international cooperation, instead of being paternalistic, it is a co-responsibility from all levels wherever the partners came from. Learning from others by creating sustainable partnerships is the most important aspect of the Universal Solidarity.

In a second part of the report, we can find a paper treating on the sustainability of medical volunteering. In a first time, I will define the different terms of the question and try to understand the profile of the persons doing medical volunteering and with what type of organization they go abroad. Then I will try to understand if the short term volunteering, one of the most common types, is sustainable, notably with the different challenges the volunteers could encounter during their missions. And to conclude this paper, I will try to give some responses to avoid non-sustainable mission and potential issues during medical volunteering.

## **1. Description of the entity**

### **1.1. Presentation of the TOGETHER Network**

The Together Network came from the idea of creating a Territory of Coresponsability between a few cities around Europe, Mulhouse in France, Timișoara in Romania, the Province of Trento in Italia, and the 14th district of Paris in France, between 2005 and 2009. In order to extend their project, more cities joined the Territory in Belgium and even worldwide with over 300 rural communities of Cape Verde (Together Network, 2015).

In September 2009, the First International Meeting of the Territories of Co-responsability was established in order to exchange the experiences, draw an assessment and lay the foundation of the Territories. Following this meeting, the name “TOGETHER for Territories of Co-responsability” has been chosen to represent the movement established in height cities in the European Union (In France, Belgium, Greece, Portugal, Italy, Latvia, Sweden, and Poland) (Together Network, 2017).

On March 24 of 2010, the *Charter of the Territories of Co-responsability* (figure 1) has been approved to specify the values, objectives and operating methods of the network.

## Charter of the Territories of Co-responsibility

### A- OBJECTIVE OF THE CHARTER

The concerted construction of well-being indicators in conjunction with citizens in different territories and at international level with a view to developing co-responsibility for the well-being of all, in line with the Council of Europe's social cohesion strategy, has led to the concept of "Territories of Co-responsibility". Two first international meetings realized in Mulhouse on 25 September 2009 and on November 2012 25th, and 26th allowed to create the basis for a network of territories of Co-responsibility.

The objectives of a Charter of the Territories of Co-responsibility are:

- to spell out and formalise the common features of towns and territories which can identify with the Territories of Co-responsibility concept; context and rationale, definition, commitments;
- to facilitate networking, exchanges of experiences and the building of common methodological references.

### B- CONTENT

#### 1- Introduction:

##### Context and rationale:

The crisis we are experiencing is so much more than a financial or economic one. Its effects are being felt in every sphere of society, causing problems in the environmental field, with the depletion of natural resources, and in the social realm, with the growth of disparities and the spread of various types of exclusion, and, more generally, creating a major crisis of confidence, prompting us to question the values and development models which govern our choices and decisions.

Since the Second World War progress has been measured in terms of the growth of GDP, but, now, a new approach is needed, which views progress in terms of the well-being of all with no exceptions, including future generations, and therefore as a matter of reducing disparities, sharing resources and promoting social cohesion and sustainable development. This means moving away from a model in which the responsibility for progress has to be shouldered by the state or the market, to one in which this responsibility is shared by everyone, in other words both public and private bodies, and citizens.

##### Definition:

A Territory of Co-responsibility is a territorial entity (a neighbourhood, a municipality or group of them, ...) in which a consultation process is actuated in order to achieve new forms of empowerment, vesting community players and ordinary citizens with co-responsibility for the changes which are needed to ensure the well-being of the whole community - present and future - in an even-handed relationship and to participate in the local and global process of co-responsibility for the well-being of all people.

#### 2- Commitments of the charter signatories

By signing up to this Charter, the stakeholders in the territories of co-responsibility undertake to:

- carry out within their territory a process of dialogue and consultation in order to develop co-responsibility for the well-being of all and constitute for this a coordination team with representatives of publics and private community players ;
- build up together common methodological references, operating as a network with other Territories of Co-responsibility to exchange ideas, projects and methods;
- contribute to the dissemination of the concept, by placing the experiences and achievements of the network at the disposal of other territories interested in this approach;
- work together to secure co-responsibility for the well-being of all at global level, including future generations, in conjunction with regional, national, and international institutions working to this end.

#### 3- Applicability of the Charter

This charter serves as a reference for territories of co-responsibility in order to identify with a common dynamic process. It represents an ethical commitment which each territory will strive to uphold.

#### 4- Territories concerned

Any territory which can identify with the definition of territories of co-responsibility and the commitments set out in the Charter may accede to it. In this case the coordination team launches a signature process by public and private actors and ordinary citizens and the territory becomes then formally part of the network of Territories of Co-responsibility.

#### 5- Revision of the Charter

The Charter may be reviewed at any point, in particular at the International Meetings of Territories of Co-responsibility.

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Figure 1. Charter of the Territories of Co-responsibility. Source: Together Network, 2013.

In 2012, during the 2nd International Meeting of the Territories of Co-responsibility, it had been decided to create the International Network of Territories of Co-responsibility that will meet every three-four years to ensure a rotating coordination at each meeting between three cities: Braine-l'Alleud in Belgium, Kavala in Greece and Kairouan in Tunisia (Together Network, 2015).

It is only after the Council of Europe Action Plan for Social Cohesion of 2013, that the International Network of Territories of Co-responsibility was officially formed on November 4th, 2013 in Strasbourg, France (Together Network, 2017).

The Network Together has different activities that are developed with all the members in an action plan. In 2016, in accordance with the project CO-ACTE and approved during the Extraordinary General Assembly of November 4th 2016, a Road Map has been created. The purpose is to “move towards co-responsibility for the well-being of all and better meet the 2020, 2030 and 2050 objectives” (Together Network, 2017).

We are going to see some main activities developed by Together Network that I have been working with, or that impact my work.

### **1.1.1. The method SPIRAL**

“Thinking about societal progress in terms of ability to live together on the same planet has become, more than ever in the history of mankind, both an evidence and a necessity.” (Together Network, 2015).

To create and build humanitarian projects that are sustainable and impactful, it is important to choose the best methodology. In humanitarian action, it is common to use a cyclical approach. The Council of Europe shared a tool kit on project management and describes the cyclical approach as a way to “administer and manage

regular or predictable events on a regular basis” (Council of Europe, p. 1). Unfortunately, disease outbreaks, environmental disasters are quite predictable and regular nowadays, this is one reason we use this type of method in humanitarian crisis's management. We can find this cyclical approach in the method SPIRAL (Figure 3) from the Together or in the SPHERE *Humanitarian Charter and Minimum Standards in Humanitarian Response Handbook* (Figure 2).



Figure 2. Humanitarian Charter and Minimum Standards in Humanitarian Response Handbook. Source : Sphere Association, 2018.

To overview, the Sphere core humanitarian standards will be a nine point circle that aims to provide responses to communities and people affected by crisis, while applying four of the humanitarian principles to know : Humanity, Impartiality, Neutrality, and Independence (Sphere Association, 2018).

As the Sphere core humanitarian standard (Figure 2), SPIRAL has been thinking and created in a way to become societal progress. Indeed, the objectives are to develop the well-being of everyone, without discrimination, segregation or exclusion, thanks to the principles of Co-responsibility.

In order to respond to the UN definition of the sustainable development : “Sustainable development is striving to meet the needs of the present without compromising the ability to meet the needs of future generations” (Brundtland, 1987), SPIRAL wants to rethink the progress that is actually a production of good and service instead of produce for well-being, to save resources and reduce consumption. Within three objectives:

- 1- Greater efficiency in the use of resources;
- 2- A better match between our consumption patterns and our well-being;
- 3- Greater attention to the intangible dimensions of well-being, which are too often ignored or even mistreated (TOGETHER Network, 2015).

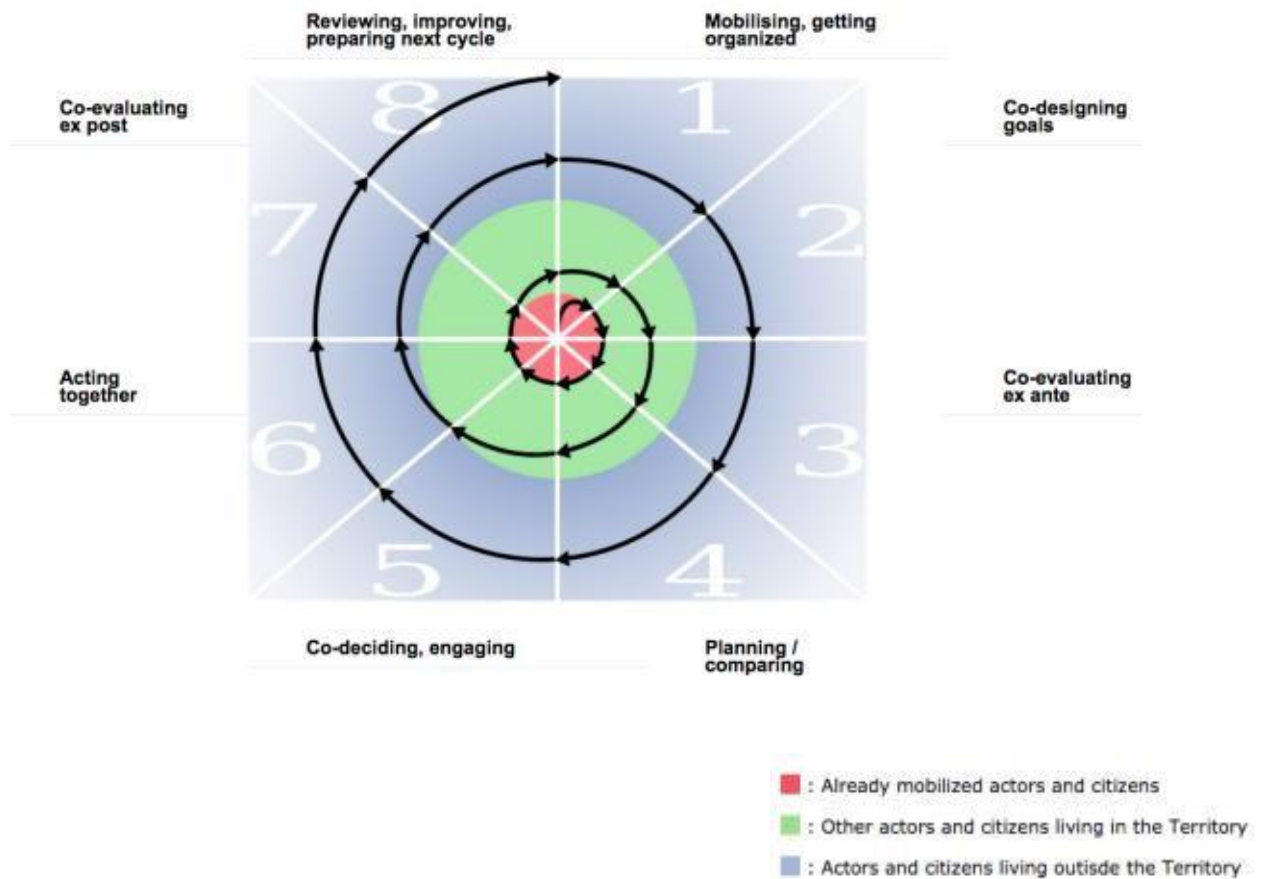


Figure 3. Sphere core humanitarian standard SPIRAL. Source: TOGETHER, 2015.

To be able to respond to this progress in a more efficient way, SPIRAL wants to use the principle of the capitalization of the methods that everyone experiments in the field. This method is co-constructed with all the members of the SPIRAL, and does not have only one way to do so. Since 2005, people are exchanging about what they did experiment on a local or national level, this makes the methods really open and evolutionary (TOGETHER Network, 2015).

Eight steps make up SPIRAL's suggested methodological framework, which forms a cycle from knowledge to action that is repeated a predetermined number of times. At the local level, three successive cycles are taken into account. Like a spiral, they gradually enlarge the group of process participants (TOGETHER Network, 2015).

The first cycle is “PREPARATION”, it consists in creating local conditions to ensure co-responsibility for the well-being of all can be possible.

The second cycle is “MOBILISATION”, it is the time to involve new citizens and actors in the process to have many more persons.

The third cycle is “CONSOLIDATION”, now the objective is to systematize the process of co-responsibility for the well-being of all.

Because SPIRAL is the future of development, it used one primordial principle: the democracy (TOGETHER Network, 2015).

A direct democracy strategy built on an intersubjective, introspective, prospective, and/or prospective approach enables us to start over from what is truly important and authentic while avoiding the effect of manufactured notions with no true basis that are spread across society. Thus, despite the fact that consumption is the most frequently cited reference in advertising, the media, etc., none of the residents' well-being or unhappiness criteria include it (TOGETHER Network, 2015).

For the introspective, prospective and retrospective approach of the democracy, SPIRAL created ten rules to follow:

- 1- Direct expression of interested parties
- 2- The equal right to speak
- 3- Open processes
- 4- Introspective and prospective approach
- 5- Building a shared vision
- 6- Inclusive syntheses of the diversity of viewpoints
- 7- Participatory and transparent synthesis development

- 8- The development of syntheses at different levels
- 9- Towards concerted action
- 10- Self-replicating and self-extending results (TOGETHER Network, 2015).

The Together Network is providing SPIRAL formation for the entities interested in joining the methods. At first, their formation was provided inside institution in direct contact with the people, but since the pandemic of Covid-19, they started to provide online formation. We can also find a formation in Portuguese on the SPIRAL website. These formations are fascinating for those who want to know more about how to change their practices and start to join the movement of co-responsability for the well-being of all (TOGETHER Network, 2015).

We can see that the SPIRAL methodology includes ever step of the rehabilitation to aim a sustainable impact. It reminds of the Linking Relief, Rehabilitation, and Development concept. The term rehabilitation refers to the post-crisis phase, which is the transition to development (Groupe URD, 2020). And the term Development refers to the long-term, structural and sustainable vision that addresses economic, health, educational, social and cultural issues (Groupe URD, 2020). To remind it as been created around 1980s to fill the «grey zone» (European Parliament, 2012, p. 4) between humanitarian aid, rehabilitation, and development initiatives related to the food crisis in Africa (European Parliament, 2012). The aim was to create a symbiosis between every step of the humanitarian assistance to have a more sustainable response to crises. The LRRD can be used in continuum; that is to say sequenced in time, but nowadays, it is rather used in a contiguum way, that is to say in a concomitant way (Groupe URD, 2020). The term humanitarian-development

NEXUS has gained popularity since 2016, inviting development players to take a more active role in addressing the effects of long-lasting crises (Groupe URD, 2020).

### **1.1.2. Council of Alliances**

One of the projects of the Together network was to bring together actors of the developments (field workers, university professors, researchers and political leaders) with the purpose of identifying and promoting the research about co-responsibility development.

[The Council of Alliances](#) have been officially launched in 2015 but after a period of inactivity it has been released in 2021 in partnership with the University Fernando Pessoa in Porto (Together Network, 2015).

The [Manifesto and Appeal for co-responsibility](#) is complementary to the project “Together let’s learn to make the right choices” that promotes the fight against global warming by tracking our carbon print and reducing it with simple actions.

The purpose of the Manifesto is to prevent international institutions and decision-makers about the need to create a co-responsibility to achieve well-being for all in the present and future in a world that is promoting its own destruction by degrading the environment and using up vital natural resources.

### **1.1.3. Manifesto and Appeal for co-responsibility**

Developed within the Council of Alliances during the second half of 2021 and early 2022, it was sent to the Secretary of the United Nations on March 20, 2022, on the occasion of the 10th anniversary of World Happiness Day.

It is important to remember about the Human Development Index (HDI) defined by the UNDP as “The HDI was created to emphasize that people and their capabilities should be the ultimate criteria for assessing the development of a country, not economic growth alone.” (United Nations, 2023). Nowadays, this index could be considered left behind, as economic development seems more important than human well-being. You can see in the next figure a representation of the most and the least happy country around the world :

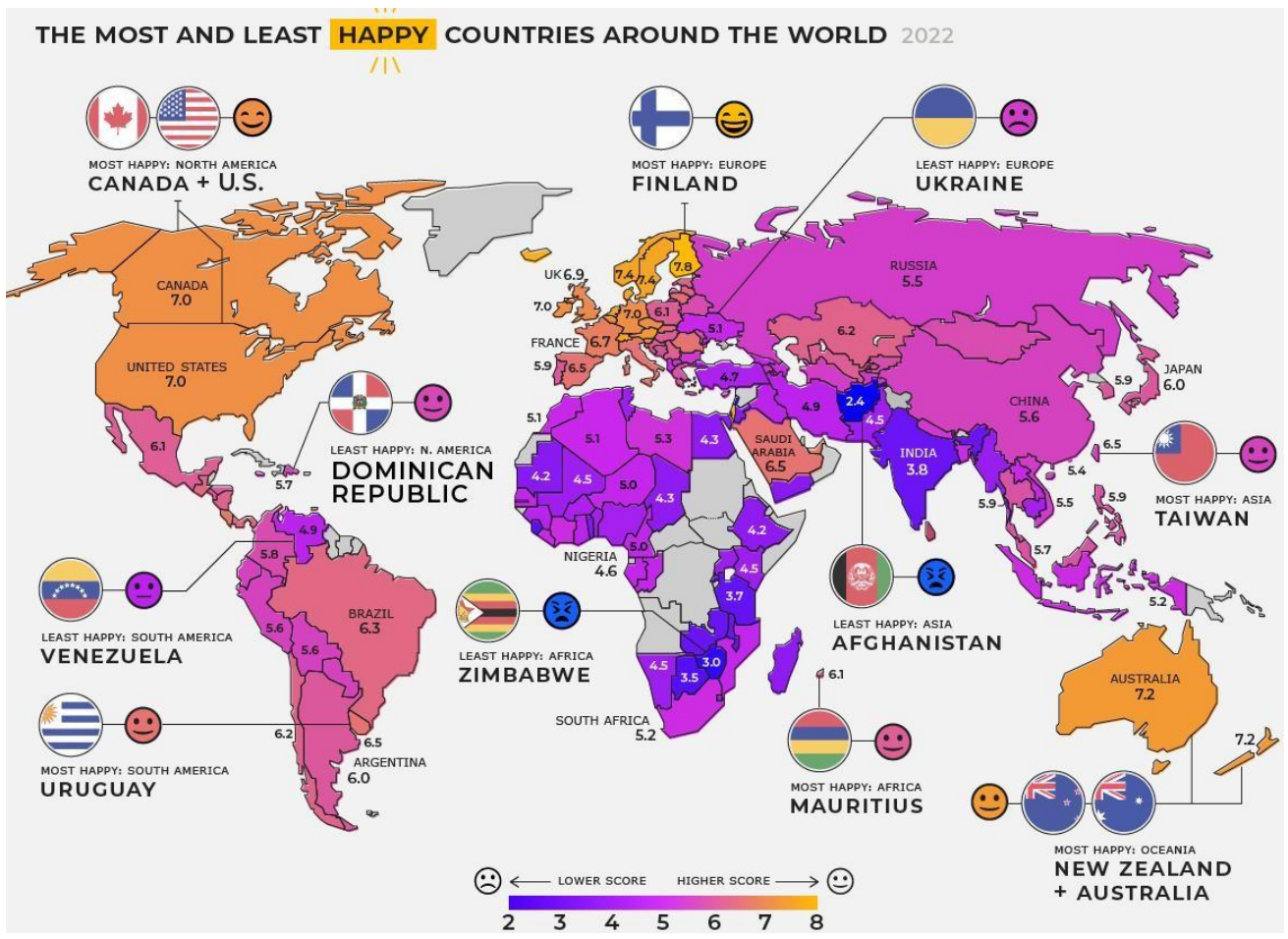


Figure 3. The most and least happy countries around the world. Source: Ang, 2022.

The Manifesto and Appeal offers a list of the responsibilities of each category of actor (citizens, local communities, municipalities, States, businesses, NGOs, media, schools, and universities), as well as general guidelines for co-responsibility. Thus, it offers a plan of action and invites everyone to participate, practice co-responsibility at their own level, and submit new ideas for the Manifesto.

The idea is to launch co-responsibility clusters that go beyond the idea of co-responsibility territories. They can start within a school, local communities, media, local, regional or national governments, etc. and become engines of co-responsibility, inviting other actors to join the cluster and snowball (Together Network, 2022).

#### **1.1.4. Universal Solidarity Project**

Launched by Jaciana Castro Silva (PhD student in Political and Humanitarian Studies) during the working group on Universal Solidarity at the 2nd Congress on Humanitarian Action and Development Cooperation, responding to the Appeal for Co-Responsibility, in June 2022.

Far from the paternalistic vision or philanthropy, Universal Solidarity is a Co-responsibility project of the Council of Alliances of the Together network. The aim is to learn from each other by creating sustainable partnerships.

The Network Together is not here to give financial support to community organizations, but to create relation and partnership between those who need support and those who can provide support. For example, during a meeting with a representative of a community association in Casa de Meio, a city in the archipelago of Cape Verde, he expressed the willingness to create a place to host persons who would reconnect with the nature and help with the agricultural work in the region. But in order to build a place like this one, they require financial support and example on the way to manage it. Samuel Thirion told him that he knew someone who is doing this in Portugal, he already has a collective house where people are growing their vegetables and taking care of the place autonomously. It would be a great opportunity for them to connect and discuss how it worked. But in this case, the Portuguese partners cannot give financial support because he did not have any profit for this project. This is where the Network Together can intervene with the Universal Solidarity Fund that is actually discussed.

This Universal Solidarity Fund will be a financed by all the partners, each at their level of financial resources. The aim is for all partners to have access to this fund to the extent that they themselves contribute or will be asked to contribute when their projects allow it.

## **1.2. Context of Traineeship**

Regarding my studies in the Master of Humanitarian Action, Cooperation and Development, I had to choose between writing a research thesis, or doing an internship. I decided the opportunity of the internship in order to earn experience of working with an association.

First, I did some interviews with an NGO in France, such as Triangle Generations Humanities, but I haven't been selected. Then, Professor Casqueira contacted me to give me the opportunity to work with M. Thirion, the General Secretary of the association TOGETHER Network.

During the last year, we have been working with the SPIRAL method, and have met with M. Thirion a few times, and it was a real pleasure to be able to assist him in this incredible association.

According to the internship plan, I integrated the network Together for 300h divided into 6 months, 15h to 20h per week. I was working from Monday to Friday, and exceptionally on Saturday for meeting with the network Together and the Cap-Verdian. This division of the time is a great opportunity for me to follow the different projects I am working on, create links, and start a student job. I have been doing the internship remotely due to the different location my tutor was in.

My status inside the organization was intern Project Manager. I assisted M. Thirion on different task like the follow-up of the website or the publication of the Newsletter. But I was also assisting him on the project of Universal Solidarity, that was the main project of the Together those days.

I was contacting NGO's that could be interested, contacting our partners in Cape Verde to have more information on their community project to be able to summarize it on the website, and taking notes during the meetings.

This internship gave me the opportunity to learn more about the type of job that can do, a project manager. This is a really different approach from what we studied for. It reminds me that I would prefer working in the field than in an office. I am aware that these are completely different work.

This internship also offers me to improve my language skills. I am a French native speaker, I have studied in English during my Master's and I have started to learn Portuguese while I was living in Porto. My internship tutor, Samuel Thirion is in Belgium and speaks French like I am, so it was easier for us to use this language. During all our meetings and e-mail exchanges, we didn't use English or Portuguese. But I needed to speak English with some people for meetings and also for the translation work I have done. For the Portuguese, it has been a bit more difficult to adapt because my level of Portuguese wasn't high enough to communicate with the Cape-verdians partners without using a translator tools for e-mails or translators during the meetings.

### 1.3. Context of Cape Verde

It is important to introduce as well the Cape Verde since I have been working a lot with cap-verdean because most of the projects I have been working on are in local communities in Cape Verde. It would be easier to understand some aspects of the work I was doing. Working with persons in Cape Verde gave me the opportunity to learn more about this country, and it's wonderful culture.



Figure 4. Map of the archipelago of Cape Verde. Source: PNGWing, 2023



Figure 5. Flag of Cape Verde. Source: Flags of the World, 2023

The Republic of Cape Verde is a volcanic island archipelago (figure 5) located on the Northwest coast of the African continent, formed by an accumulation of volcanic rocks after eruptions on the submarine platforms (Governo de Cabo Verde, 2019). The different islands that compose the archipelago are Santo Antão, São Vicente, São Nicolau, Sal, Boa Vista, Maio, Santiago, Fogo and Brava (Governo de Cabo Verde, 2019).

Cape Verde was discovered by the Portuguese Crown navigators in 1456. It was on the island of Santiago, in the former capital Ribeira Grande, that the colonists created the administrative and religious center of the West African territories annexed by Portugal (Consulat de Marseille, s/d). Subsequently, many European settlers settled on the different islands of the archipelago, whether they were administrators, missionaries, or even exiles. Many black slaves from the African continent were moved to Cape Verde to meet the demand for agricultural labor. These slaves were also converted to Catholicism, which is very present in the archipelago (Consulat de Marseille, s/d).

Since the 19th century, the cape-verdean people have not stopped immigrating. It is estimated that the cape-verdean diaspora is larger than the number of people living in Cape Verde. The United States, Senegal and Europe are the main destinations for cape-verdeans due to its geographical position (Consulat de Marseille, s/d).

The numerous natural reserves and parks that exist in the nation have maintained the fauna and flora of Cape Verde. The passarinha (a green-headed kingfisher), crow, and runner are three important bird species among the major fauna species. There are 755 plant species in the fauna, 83 of which are endemic and 224 indigenous. The dragon tree is particularly significant since it is a tree that existed before the archipelago was discovered (Governo de Cabo Verde, 2019).

The most rude islands have a variable climate with some rainfall. The ocean and trade winds have a moderating effect on the climate, keeping it mild. The yearly average temperature hardly ever rises above 25 °C and never drops below 20 °C. Seawater ranges in temperature from 21 °C in February and March to 25 °C in September and October. The possibility of year-round tourism is ensured by the climate stability of Cape Verde (Governo de Cabo Verde, 2019).

<b>Capital</b>	<b>Independence</b>	<b>Language</b>	<b>Area</b>	<b>Head of State</b>	<b>Head of Government</b>
Praia	5th July 1975	Portuguese	4 033km <sup>2</sup>	José Maria Pereira Neves	José Ulisses Correia e Silva, since 2016
<b>Unemployment</b>	<b>Tourism</b>	<b>Tourism part on GDP</b>	<b>GDP</b>	<b>GDP/pers</b>	<b>GNI/capita</b>
20% (2020)	160,000Md\$ (2020)	8,7% of the GDP	1,70 Md €	3 064\$ (2020)	6230\$ (2021)
<b>Life Expectancy at birth</b>	<b>Literacy rate</b>	<b>Expected years of schooling</b>	<b>Mean years of schooling</b>	<b>Human Development Index</b>	<b>Human Development Rank</b>
74, 1 years old (2021)	85%	12,6 years (2021)	6,3 years (2021)	0,662	127/191 (2020)

Table 1. Main information about Cape Verde. Sources: France Diplomatie (2021), United Nations (2023) and World Data. (2021)

Something that I have learned from the description made by the cap-verdean on the SPIRAL website is that the water from this season is not correctly used and flows from the top of the mountains to the sea. This is why they are working on ways to reuse this water that could be a life change for the agricultural practice. The country also has difficulties to have access to drinkable water, Together network used to work with communities to set up solutions to conserve rain water and transform it into clean water.

Tourism and importation business are the most important part of the cape-verdean GDP, the country imports 85% of its food needs. The country has been impacted a lot during the COVID-19 pandemic due to the absence of tourism (France Diplomatie, 2021).

In Cape Verde, the good relation and support between neighborhood is really important and a part of their culture. This is an important example of true solidarity for developed countries. This is one of the reasons the Together Network started to work and create partnership with the cape-verdean population. They have many community associations that have been created to develop their regions and to promote education, agriculture or sports for the local population.

As we already talked before, the Human Development Index is important to see how developed a country is. We went on the UNDP website and compared it to France and Portugal in 2022 (Figure 6).

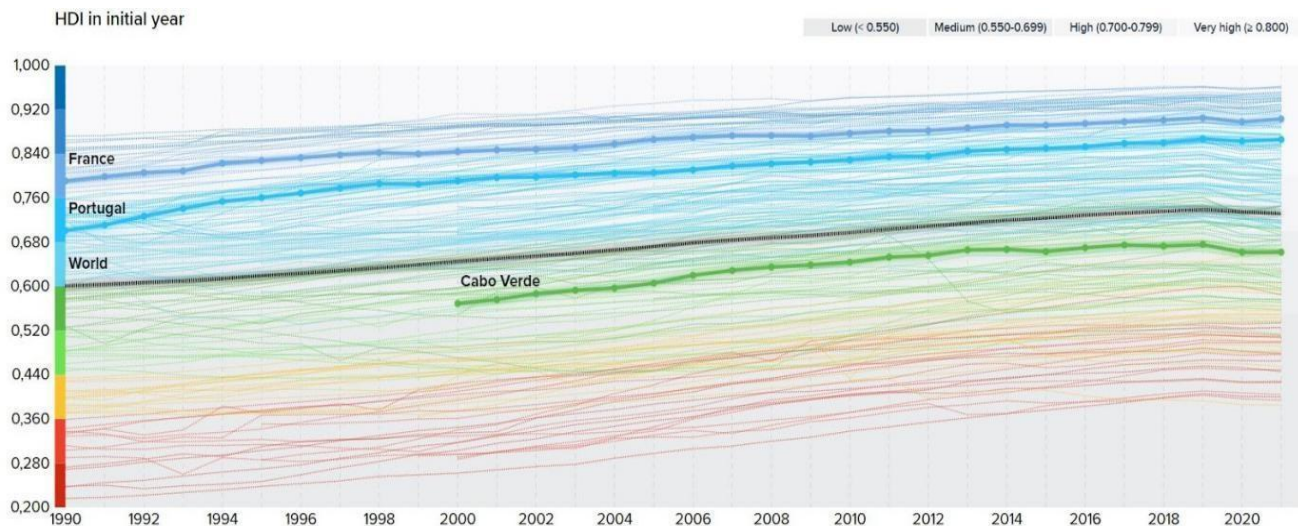


Figure 6. Human Development Index in initial years. United Nations, 2023.

We can see on the schema (figure 6.) Every country figuring on the Human Development Index represented with a line divided between 10 color used as a scale to show their rank in the world and their variation from 1990 and 2020 (United Nations, 2023). Focusing on three countries as said before, we can see that the Cape Verde is an under the world average in 2020 with a total of 0.662 (United Nations, 2023). As we can see in the figure, the medium is between 0.550 and 0.699, It can be concluded that despite its difficulties, Cape Verde is still below average and only needs to evolve (United Nations, 2023).

On a political aspect, Cape Verde is working with a National Assembly (Assembleia Nacional) that is an IPU membership in the African group from 1982. The actual speaker of the Assembly is Austelino Tavares Correia, elected on 19 May 2021. The Secretary General is Paula Lima Martins and has been elected the 1st July 2021. On 72 members, 6 are representatives of abroad cape-verdean citizens. Having women in a high post in the country's political sphere is representative of the importance of gender equality and the women power in Cape Verde. In fact, since the

Parity Law approval in November 2019 that stipple that the electoral list must have at list 40% of women or men (Article 4.1-4.2 of Law 68/IX/2029 of 28 November 2019) the representation of women members of the Assembly is increasing (IPU Parline, 2023).

As we can see on the next table :

	Female members	Male members
2022	30	42
2021	28	44
2020	19	53
2019	18	54
2016	17	55

Table 2. Gender representation in Cape Verde Assembly. Source: IPU Parline, 2023.

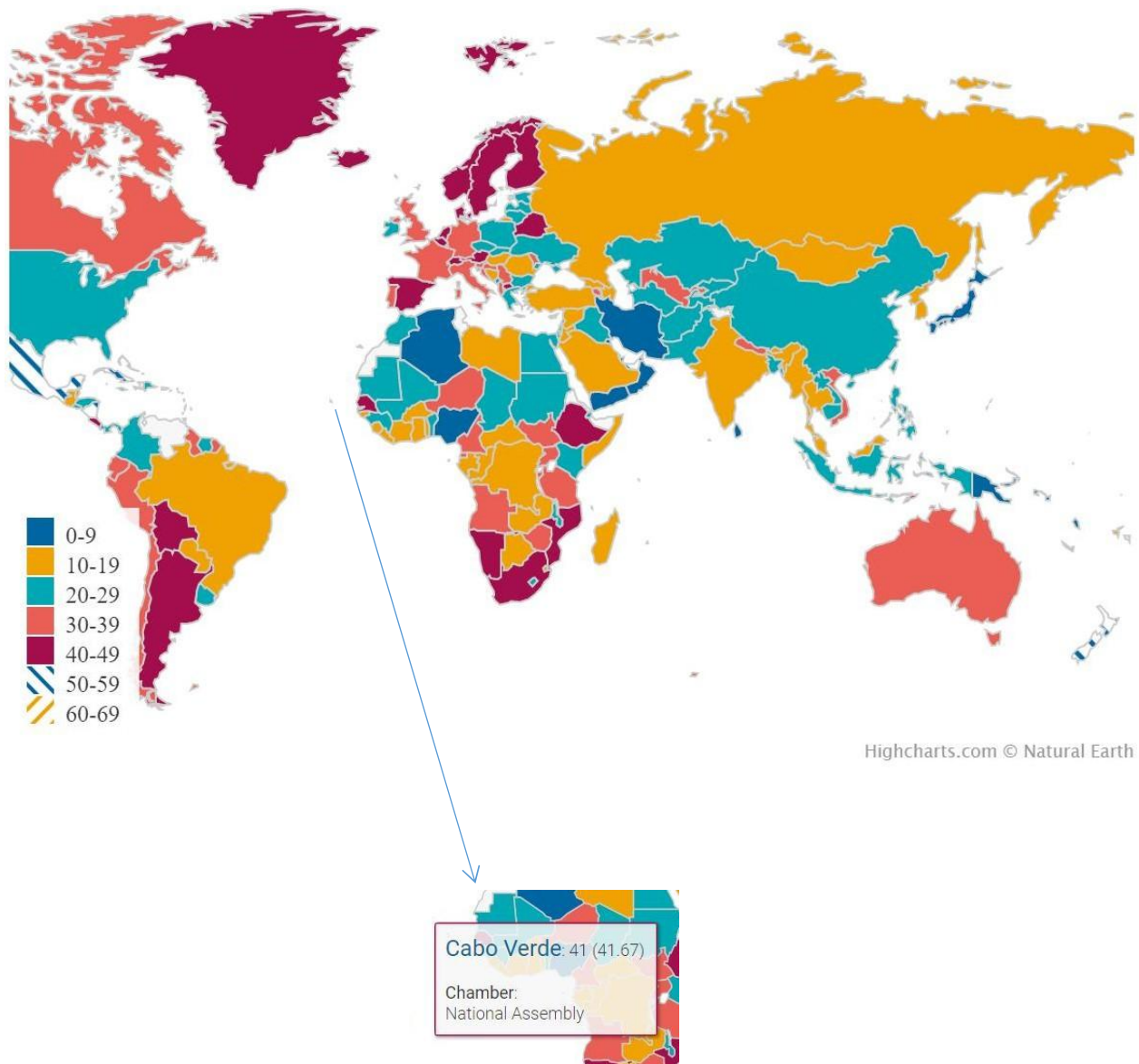


Figure 7. Gender Equality in Assembly around the world. Source: IPU Parline, 2023.

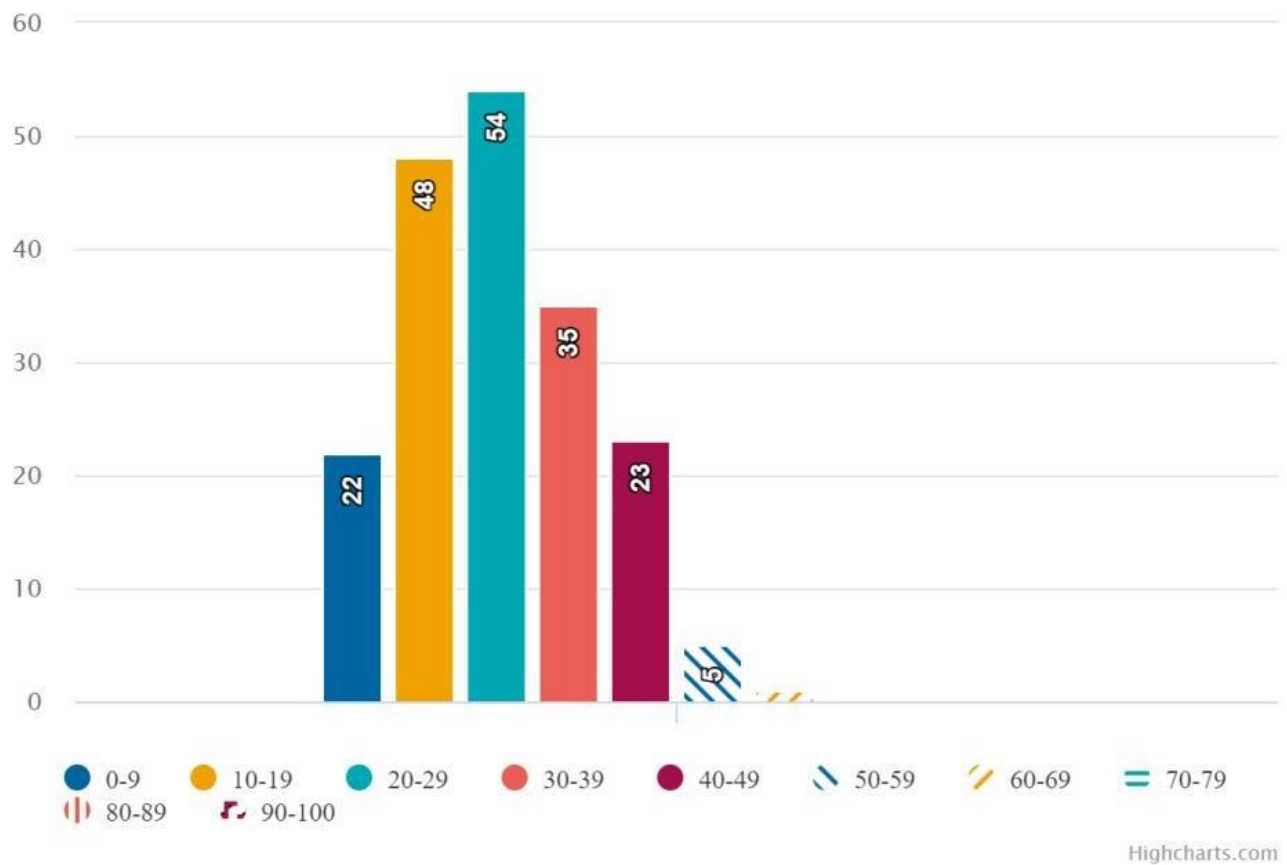


Figure 8. Gender Equality in Assembly around the world. IPU Parline, 2023.

In the figure 7 and 8, we can see the gap in gender equality all over the world. It is important to notice how advanced Cape Verde is in comparison to others European countries. The Cape Verde percentage of women in the National Assembly is 41.67%, while in France it is only 37.78%, and in Portugal 36.09% (IPU Parline, 2023).

## **2. Activities performed and relevance**

During my internship, I had the opportunity to do various work in the field of project manager.

Most of the time, I have been working on the Universal Solidarity Project. Since the second semester of 2022, the Together Network has been working a lot with the cape-verdean partners in order to develop the Universal Solidarity Project. As I explained before, it aims to facilitate the fair distribution of resources at both local and global levels.

### **2.1. Update the website and translate in different languages**

During the first moment of my internship, I have been working on the website wikispiral. I was allowing the access to the cape-verdeans facilitators on the website, for them to be able to write about their community association.

One part of my internship was to keep the website updated for the collaborators and other visitors. It is important for an association to be able to share quickly the follow-up of their actions. Another specific aspect is to be able to share the information in different languages because Together collaborators came from different parts of the world. I did have a look at every page of the website to make sure the translation was available, and the pages were last updated.

My methodology was to check every page in French, English and Portuguese. Then I was able to compare with the most developed pages, the information. When things were different, I wrote it on a document to be easier for Samuel Thirion to understand the correction I have made because he was the only person who can edit the pages.

For the translation of the document, I was using the on-line tool called “DeepL” and my knowledge of the language (www.deepl.com).

Doing this updated work give me the opportunity to explore further the website Wikispiral (<https://wikispiral.org>). I used to go on the same pages during my internship and even if I looked on the website before, I learned many things about the creation of the network Together, their different partnerships and past actions.

The exercise of translation was also fascinating because it gave me the opportunity to work on my English differently than speaking or listening to it. It also gives me the opportunity to learn more about the Portuguese language that I do not speak yet.

## **2.2. Participation on newsletter and reports**

In the logical continuation of things, I was asked to write the newsletter that hasn't been made in two years, because of the slowdown of actions due to the Covid pandemic. It has been a difficult exercise since it was the first time for me doing that type of work. There was quite a lot of information to share with the partners. I needed to go back to the website to see what had happened and to be able to summarize it clearly. I used a lot of help from Samuel Thirion because I was always confused about how to get the most important information and not developed about it. Likewise, I should have put myself more in the shoes of the partners who already know the projects that have been done in previous years.

I have been able to participate in different meetings for the Universal Solidarity Project and also for the General Assembly of the Network Together. I had to take notes on what was said, and I had to write summarize to update it online. This wasn't easy for me due to the language barriers and also, as I explained above, I have some issues to extracting the most important information. But it taught me how to write a meeting report, which is really important in any work.

### 2.3. Looking for partners

One of my assignments was to look for new partnership to enter the Universal Solidarity Project. In September 2022, the Together Network organized the 3rd Universal Solidarity Webinar with the participation of actual partners and the cape-verdeans representative of the pilot project, and it was opened to interested persons. But in order to meet new partners, it was required to contact them.

I started to look for international and national NGOs with similar values as Together and created a list of them, looking for the e-mails of their leaders.

Then I wrote small personalized messages in order to introduce them to the Universal Solidarity project and to invite them to the webinar (Figure 4).

Dear Sir Andrew Parker,

Like you, the TOGETHER network is convinced that solidarity is organized collectively. The populations of vulnerable communities are the first actors of their evolution since they are the ones who formulate their needs.

The importance of our actions as well as yours is to accompany these communities in the use of their skills at each stage of their project in order to acquire long-term autonomy, more specifically on environment issues and rural development.

It is because we share common values that we contact you to invite you to a webinar on the theme of universal solidarity that will take place on November 5, 2022 from 3:15 pm to 6 pm CET (Brussel time) at: <https://videoconf-colibri.zoom.us/j/81099349243>.

The purpose of this webinar is to learn about local forms of solidarity existing in villages or urban neighborhoods in southern countries, based on the example of Brazil and Cape Verde, to discuss with webinar participants how a more global solidarity could be promoted with these communities, facing basic needs (drinking water, sanitation, food, housing, energy, ...)

Your participation in this webinar is very important for us to help us identify possible solutions. It will start with a round table discussion of the participants, followed by a presentation of examples of local solidarity including concrete cases, then an open exchange on the global solidarity that could be implemented. In particular, the hypothesis of setting up a universal solidarity fund operating on a principle of co-responsibility will be presented, in particular through the self-replenishment of the fund and the traceability of its reuses.

We look forward to your reply.

For the TOGETHER network,

Carine Jansen, President, Samuel Thirion, Secretary General and Laurine Grizelak, project manager.

PS: TOGETHER is the international network of territories of co-responsibility, created in 2009 and today present in about twenty countries, mainly in Europe, Africa and Latin America. For more information see <https://wikispiral.org>

Figure 4. Example of an E-mail send to reach new partners.

## **2.4. Writing an paper about Universal Solidarity Project**

One of the last projects I have been working on, is the article about Universal Solidarity. This part is quite important for the Network Together because it will be published in an international review and give a lot of visibility to it.

To remind, the Network Together is a link between Cape Verde and Europe to create contact with community associations and cities or European communities that are interested in connecting with a developing country project. Together do not provide money for the project but create partnership between future partners.

The project of cape-verdeans needed to answer some important criteria :

1. Is the community association the owner of materials, places that they used ?
2. How does the project fit into the ecological transition process?
3. Is everybody in the community involved in the project ?
4. Does the project primarily benefit the most vulnerable people in the community?

My participation in this paper will be a collaboration with Samuel Thirion and doctoral students of a university in Cape Verde that will be writing about it too. I will also use my part in the paper I am writing in this report to introduce a new method of sustainable partnership.

## **2.5. Organizing meeting with the cape-verdians for the pilot project**

Organizing a meeting with the cape-verdeans partners of the Together network has been one of my latest projects for this internship. In order to relaunch the Universal Solidarity project, we needed to have further information about projects that needed support in Cape Verde. Some of these projects were presented during the third webinar for the Universal Solidarity project in September. My job here was to write some summarize about their project and to make it clear for the readers and futures partners, how does projects are included in the universal solidarity. I met some difficulties because those projects were partially written on the website spiral and I needed more information to achieve it. Samuel came with the idea of doing an on-line meeting with them to ask them questions about the project after failing to get those information by emails.

### **3. Analyses of concept/practices**

I am really glad that I had the opportunity to work with the Network Together during these last months. But even if I learned many valuable things about the work of a project manager, I have to admit that I faced some difficulties that make me progress.

One of the first difficulties would be with the lack of timeline and organization of the internship. Indeed, I was asked to do different things at the same time and in a short amount of time. For example, I have been asked to find and contact an organization for a meeting only a few weeks before the meetings. This was a little too short to have answers from the organizations. On the same page, I have been asked a few times to stop the task A, that I was doing to do the Task B that was more urgent. Even if I understand that some things need to be prioritized, I was confused to let the Task A beside and sometimes forget that I was supposed to do it in a first time.

With the benefit of hindsight, I would have asked for a retro planning to keep being in touch with the work I needed to do and organized my work in a more efficient way. It would have given me the opportunity to respect the deadline and be capable of working faster.

I also had some difficulties with the Portuguese language that I didn't speak a lot. It was a central part of the internship. Even if I was using tools to communicate with the cape-verdeans or to translate reports and other papers, it created barriers that might not have been there and saved me time in my work.

I knew from previous experience that it can be difficult to work with persons from others cultures, but I still was a bit frustrating while working with the cape-verdeans. It is important to know that they do not have the habit to wrote down information. They use much more oral exchanges and do not have the same writing

codes that we use in Europe. During my work I needed to make a summary of their project and their communities, but most of the time, the only information that was updated on the website was not completely useful, it misses a good deal of important information as for example, the budget they needed. It was part of my work to contact them to ask for further information. But due to time differences and their tendency to not respond quickly to emails, it was difficult to reach them and move forward on the project.

#### **4. Academic study: Is medical volunteering in developing countries part of a sustainable approach?**

##### **4.1. Introduction**

Equal access to health is a really important issue in this world. Some countries have been developing technological health material, researching treatments that are saving lives, and some have free care and almost free access to health for every citizen. But some don't even have access to basic health needs and can't protect their citizens from common diseases. The COVID-19 pandemic has been a good example of unequal access to care. We saw how difficult it was in our developed countries to protect the population from the virus and to guarantee them access to hospitals and, after, to vaccines. But we also see the solidarity organized by the WHO to give developing countries basic materials and vaccines to protect a small part of their population. For some people, it is really important to share their skills with the most vulnerable population. This is a reason why the Global Health Volunteering program exists. There are millions of people, students, professionals, or retired professionals that are crossing borders to contribute to this massive global solidarity. But sometimes, it could be inefficient, harmful, and useless for the hosting communities.

This article is about questioning the durability of Global Health Volunteering. Challenging the profiles of the volunteers, the reasons they are humble or interested in their actions, looking at who sponsored and sending them and also knowing the point of views of those who host the volunteers. We are going to see which are the challenges all around Global Health programs from both perspectives of volunteers and hosting persons. And we will address some ideas to improve those programs, and how to make them the most durable and respectful possible. With critical regard to this situation, I studied a journal article found online. I had some etymological issues with the term medical volunteer that could be used to mention persons who are volunteering for a global health program and also people who volunteered to be

medically studied for medical research. It was important for me to be able to see the point of view of all the people concerned about it. From the volunteer to the patient being treated.

In this paper, I am going to use the word “vulnerable” to describe people who are recipients of global development aid, not for the purpose of discrimination or mockery.

## **4.2. Definition of the principles of volunteering and profiles of the volunteers**

In order to understand what is sustainable, we should refer to the definition of sustainable development from the United Nation, “Sustainable development has been defined as development that meets the needs of the present without compromising the ability of future generations to meet their own needs.” (United Nations, s/d). Following the 2030 Agenda for Sustainable Development Goals, it should answer the 17 goals, all linked together to promote and ensure global perennial well-being, hand by hand no matter the economic growth. Our research paper is going to focus on goal number 3: Good Health and Well-Being, while thinking of a different way to promote health in developing countries: volunteerism.

Global Health volunteering can be considered a societal phenomenon if we think about the many volunteerism programs for health students or the businesses that have been created to send abroad people who want to make a change in poor people’s lives. If volunteering abroad is common nowadays, it can be seen either as a way to contribute to global development or as neocolonialism and counterproductive. These different visions can have an impact on the practice and the purpose of the “humanitarian volunteering mission” and their consequences can have a poor impact on vulnerable populations. For many people, we cannot call it volunteering anymore but should use the term “voluntourism” instead, due to the massive amount of for-profit organizations that are sending rich public to poor countries, charging them a lot of money that will not be used for global development. If some persons from the Global North are only doing these voluntourism experiences to share pictures on social media and travel on the back of persons in need, global health volunteering can also be a life changer for a vulnerable population. Global Health Volunteering as world aid programs and NGO work can provide them access to free health care and increase their well-being, as the Sustainable Development Goals want.

It is important to define volunteerism to be able to understand what we are going to talk about and the limits we are going to demonstrate. According to the dictionary of Cambridge, volunteerism means “the practice of doing work for good causes, without being paid for it” (Cambridge Dictionary, s/d). However, volunteerism is more than just doing free work for good causes. For many years, governments and NGOs were sending volunteers on missions to poor countries without knowing what the population really needed, or which competencies the volunteers had. This so-called neocolonialism is a root of the White Savior Complex that is predominant in volunteerism. (Ashdown *et al.*, 2020). Indeed, the gap between volunteerism and voluntourism is small and many people fall into the trap of “helping” poor communities they ignore everything about while enjoying a vacation in a remote part of the world. Volunteerism is about the methodology used to provide aid and to support the improvement of the community’s well-being, not about some desire of being helpful as noble as it could be (Ashdown *et al.*, 2020).

Now that we are aware of the complexities of volunteering, we can have a look at the profile of the volunteers. This part is crucial in analyzing the quality of medical volunteering. As Lough, Tiessen, and Lasker did in their work “Effective practices of international volunteering for Health: Perspectives from partner organizations, and Reynolds, in Medical volunteering: Giving something back,” we could divide these profiles into five different categories.

Firstly, the so-called pre-medical students, by definition, are medical students that haven’t graduated yet their medical school, they will do volunteerism during their holidays or for an internship experience (Lough *et al.*, 2018). Their participation is quite discussed, as we will see later, mainly due to their inexperience in the medical field.

The second categories are the graduated students that are looking to do a “gap year” before starting their professional life to earn field experience (Lough *et al.*,

2018). The real reason they are doing volunteering can be outrageous and need some discussion.

The third is one of the most relevant medical volunteer profiles. It is a matter of highly skilled health professionals that are doing international volunteering or solidarity breaks from their jobs (Lough *et al.*, 2018).

The fourth profile concerns a retired health professional that wants to give their time doing something they have skills and knowledge for, now that they have time and opportunity (Reynolds, 2006).

The last profile, we will not talk about it further in this paper because they are people that are nothing related to the medical field that accept to do health care for people in need without experience. This is extremely dangerous and harmful, and there is no need to explain what is wrong with this practice.

To focus on the student profiles, we cannot know what their intention really is when they want to volunteer. It could only be from a charitable point of view of them, or it could hide something less altruistic. In his study *Global Health Volunteering; Understanding Organizational Goals*, Lasker interviewed United States university professors and other entities that sponsored students to experience Global Health outside of borders, the conclusion he draws is that a young graduated student with a Global Health experience as a good image and seems to be concerned by public health and community needs and his by fact, more attractive for the employer (Lasker, 2015). When this is the professor that sends his student abroad to make them look good in the labor market, one can easily question the sincerity of the process and the consequences of this practice. Even if we can understand the difficulties that encounter the young to finding a job nowadays, the countries of the South must not be sacrificed to the profits of tomorrow's doctors.

The reality behind these types of missions is, unfortunately, not only focused on giving access to healthcare as Lasker quoted in his study, “Half of that mission is

expanding access to healthcare. The other half [...] is very much about getting students and volunteers engaged responsibly in global health activities. The explicit goals are to have them involved in work related to health disparities, global health, and health equity for the remainder of their career in their life” (Lasker, 2015, p. 13). In his research, Lasker interviewed sponsoring organizations that have volunteering programs to send students abroad. Those organizations are looking for students to be sponsored and take all the charges linked to the mission. For example, the International Federation of Medical Students is the biggest organization sending students from 97 countries in the global South for volunteering programs in partnership with universities and local NGOs (Lasker, 2015). But many US sponsoring organizations agreed on the fact that they are “doing humanitarian” (sending volunteers to developing countries), only to have a good image (Lasker, 2015). Once again, doing anything related to humanitarian missions for the only purpose of having a good image should be forbidden, organizations forget that there are lives behind humanitarian missions and that they cannot act without considering the harm that they could cause.

As we expressed earlier, there are different ways to go to volunteering missions. Some are non-profit organizations that are specialized in sending medical students. And unfortunately, there are also for - profit organizations that create a business around it. To quote Bauer in his study, “More harm than good ? The questionable ethics of medical volunteering and international student placements”, “There are also unqualified people eager to do good to enhance their holidays, and who are, unfortunately, accepted widely by commercial placement agencies, other sending organizations, or local facilities” (Bauer, 2017, p.2). We can easily question their abilities to send students or others people abroad since they are doing money on the back of the vulnerable population. Bauer shows the absurdity of the marketing line that using for-profit organizations with citation like “over 20,000 happy volunteers” (Bauer, 2017, p. 3), but even if it is important for volunteers to be sending in a place they should feel safe, what about the population they went to, are they as happy as the

volunteers ? Why shouldn't we use the population point of view to choose the sending organization ? It is important to remind to future volunteers that they should be aware of the reasons why organizations are sending volunteers. It is not acceptable to leave without thinking of the consequences. If it is a for-profit organization, they can make sure the money is going to be given to the local association or for the local beneficiaries, not for the owner.

### **4.3. Is there a sustainable impact of short-term medical volunteering ?**

After the Second World War, an increasing amount of NGOs has been created all around the world to be able to do the same work NGOs did during the war, but for poor countries. During the '60s, many nurses and doctors have been sent away to “apply for western medicine in the non-western environment” (Bauer, 2017, p. 1) with the only intention to be a good citizen of the world and an important state for the United Nation. This is only 20 years later, that the question of the ethics in this practice has emerged, but instead of a reconsideration from the persons involved “these critics may come as a surprise as it seems to mean to question the noble task of helping the sick and injured in a poor country” (Bauer, 2017, p. 1). The reality behind it is that western doctors use the third-world patient as “an experiment folder” (Bauer, 2017, p. 2) to improve their skills in the field. This could be outrageous news that people can excuse by the time it happened, but over 60 years after this is still the same thing, but we are not talking about medical staff, we are talking about medical students. As we saw before, some of them didn't even graduate from medical school and still are enrolled in medical volunteering missions.

One of the issues is that medical students usually do it during their holidays, not more than 2 months, but they are not the only ones, short-term missions are often proposed by profit and non-profit organizations. This solution seems to be perfect, every few months new people will come to give their time and their skills since it's easier to leave for a few weeks. In fact, short-term missions are not efficient. In the medical field, it is important for a patient to have a follow-up with his doctors, this is the easiest way to try to see if there is progress in the patient's health. But when the doctors change every few weeks, this couldn't happen and the patient gets back to the beginning. Another issue is that the short-term volunteer cannot take full-responsibilities for his action. It does imply that you will not be responsible if the

patient dies from recovering a surgery if he already returned and left the patient in charge of the local medical workers (Wall, 2011). In his study, Bauer resumed all the issues that could be encountered with students doing medical volunteering. The first reason is obvious and can cause unfortunate damage, they often apply what they learned inappropriately or even worse, they can do medical care without having being trained for (Bauer, 2017). Those are really dangerous for the patient and shouldn't be an issue because they shouldn't be asked to do it. It either can be only their fault if they are doing it on without being demanding, or either both local leader and student if he is asked or forced to do it. The student should be completely honest and refuse to do anything they aren't prepared for (Bauer, 2017). Another issue is that they can have issues understanding the cultural differences where they are volunteering, we will talk about it later in this paper (Bauer, 2017). The last issue is that there are too many students that are applying and too many persons in places where they shouldn't be. This one is linked to the fact that they also are more likely to be more interested in tourism than volunteering which is not the aim while doing volunteering abroad (Bauer, 2017). This is creating massive tourism in rural areas that are causing environmental disruptions, for example (Bauer, 2017, p. 3).

As Bauer said, “fistula tourism” does not change a broken system without addressing a broken system, any “help” can only be a short-term fix which may benefit individual patients but does not improve long-term access to quality care” (Bauer, 2017, p. 4). Calling medical volunteering “fistula tourism”(id.) is a good way to highlight the ever-increasing mass of people applying for medical volunteering but only doing the strict minimum and travels in the country instead. He also denounced the issue of the short-term volunteering, and it's non-efficient result on population and quality care that are facing the beneficiaries

The example of the perception of short-term medical volunteering has been studied with the Guatemalan example of a small hospital that is working with paid Guatemalan physicians and long-term physician volunteers, but also short-term

volunteer nurses and local nurses and medical assistants. Their methodology was to talk with Guatemalans working in the medical field, but also from the health government and parents having a child threatened by a short-term volunteer (Green *et al.*, 2009, p. 4). The conclusion of the study shows that Guatemalans considered that it is not efficient for short-term medical volunteers to work on their own without being with a local physician or a long-term volunteer. The reasons are that they usually want to do more than what is possible, and their work ends up not being efficient due to the lack of time they have and the number of patients that are in need of care. It has also been explained that volunteers need to know their limits in terms of medical care but also their personal limits (Green *et al.*, 2009, p. 9).

For local physicians, it is also difficult to host short-term volunteering. First, it is really expensive, most of them asked the volunteers to pay for their stay while the NGO is paying for the medical work expenses. They also lose a lot of time having to take care of accommodation, and transportation of the short-term volunteer, and help them translate to communicate with the population. They conclude by saying it is more interesting to have a limited number of short-term volunteers and to bring specialists who are not common in the country instead of nurses or doctors that are already here (Green *et al.*, 2009).

After seeing only negative examples of short-term volunteering we can talk about a few positive aspects. Short-term volunteering can also be an opportunity for local health care if it is done sustainably. In fact, the local physician agreed to say that it gives them a new perspective on medical care, it is educational for them, but it is also for the short-term volunteer to learn from their host. Another aspect is that they also bring new materials to be used. (Green *et al.*, 2009). Far from the polemic that the doctor and sterile material that they used are often expired or to expire soon, it gives the opportunity for the local to have at least more quantity of medication or equipment that could be used by the volunteers that know how they work (Green *et al.*, 2009, p. 10).

This last point that we are going to describe is not faced by the volunteers, but faced by the local. In their study “Perceptions of short-term medical volunteer work: A qualitative study in Guatemala,” (Green *et al.*, 2009), the authors came up with something really important and unfortunately reliable in many countries. In this example of Guatemala, public hospitals are free, but whenever you need to care for something that requires a specialist or a complicated operation, you have to go to a private place where it is expensive. To face this unequal access to health care, NGO created free care health facilities where everyone is accepted. But instead of dealing with a problem, it’s created others, because the government tends to give funds to NGO hospitals instead of their national public and private places, exacerbating a gap that already exists since national hospital will not be less expensive without funds from the government. This is also creating a dependence on NGO in developing countries. Another issue is that many people who can afford medical care, will come to the free care and take the right to be treated to people in financial difficulties. The debate is either we provide free care or do we ask for a minimal amount of money based on a socio-economical scale ? Of course, the people in real need don’t have enough money to cover their medical expenses. But they will ask for a symbolic dollar that could give them the responsibilities of their health (Green *et al.*, 2009).

Bauer agreeing on the fact government rely to much on volunteers works, but in another hand, why the government would give money on health system when foreigners came to do it for free ? (Bauer, 2017). But this is not the only issues of volunteers work. In fact, volunteers programs is creating a local unemployment system in developing country. As we saw earlier, the lack of follow-up of patient is dangerous and can push them to drop out their care because the medical volunteer isn’t here any more (Bauer, 2017). Some patient ended up being more confident with a foreigners doctors because they are seen as better educated (Bauer, 2017). It does created a parallel health market where local paid health workers are fleeing out there country because they do not find jobs at home due to NGO facilities and medical

volunteers (Bauer, 2017). It is creating a biggest hole in the healthcare system and is not a sustainable solution to the country development.

#### **4.4. What are the different type of challenged that volunteers can meet ?**

Doing medical volunteering isn't always easy. It does matter the fact that most of them are not well-prepared. But even for those who are prepared and doing long term volunteering it could be difficult to adapt or face some issues. In this part, we are going to oversee all the issues that can be encountered by a volunteer during a mission. But we are also going to see the consequences of those on the population that are being the collateral victims of these unwilling situations.

There is nothing more challenging than being a medical volunteer in a developing country. The lack of medical facilities, materials, hygiene is really important and will force the volunteer to work differently. In many developing countries, they are reusing material that should be destroyed or fertilized (Wall, 2011). In my own experience, I did volunteer in a local facility where I was doing administrative work, but the doctors asked me to clean with simple soap glass factory where they put blood samples that are used for microscope analyses. This lack of hygiene can be a real choc for medical volunteers, but they need to adapt to the field reality and their insufficient access to material. In their study "Perceptions of short-term medical volunteer work: A qualitative study in Guatemala," the authors show that it is not helpful to send a ton of short-term volunteering because it costs money, and this money could be used for buying or offering medical supplies they can't work without (Green et al., 2009, p. 10). Wall in his study "The Context of Ethical Problems in Medical Volunteer Work" is quoting Goldring to agreeing with this assumption in his research pointing the fact that the "Medical volunteers have the knowledge and skills needed to provide life-saving care but lack the resources necessary to intervene" (Wall, 2011, p. 84). It is important to remember that in experiments medical volunteers do not have the enough experience to know how to react and adopt safety for patients and themselves, so they should not be using different equipment without an experiment doctors with them (Bauer, 2017, p. 3).

One point, that is really important to not forget for the volunteers, is that you cannot treat a patient from a developing country as you treat a patient at home. To supplying this explanation, diseases aren't the same taking, for example, the most common diseases in African countries are tuberculosis, malaria or malnutrition cases. In his study "The Context of Ethical Problems in Medical Volunteer Work" Wall says that medical volunteers will have difficulties treating conditions they know because it will be often in a more advanced stage than they have seen at home due to the lack of access to medical care (Wall, 2011). It's a fact, patients in rural areas must go to health facilities too late because they can't afford care.

As we saw earlier with the example of Bauer and what he wrote about medical volunteers doing cares they are not supposed to do, is pointed by Wall as an ethical issue. Yes, they should not apply care they are not trained for, but they also have to face an ethical conflict of treating the patient even if they are not well-trained or letting a local doctor or another medical volunteer do it even if it means that the patient will be waiting more and more due to the lack of medical staff and risking their lives (Wall, 2011). Thanks to Wall, we can have a vision of the reasons that could push a volunteer to do something they shouldn't do. Unfortunately, ethical considerations are not changing from one person to another, and it is impossible to know if at the end, they are doing right or not.

In the medical field, communication is the key to healthy patient and doctor relations, it's doing to help doctors to understand patient's symptoms and, on the other hand, help patient understand their disease and appropriate treatment. In the case of medical volunteering, there is a real lack of communication that can cause much damage. In fact, medical volunteers should not go into a country they are not speaking the language. When you are supposed to give care, you do not leave with the idea of progressing in a second or third language. But sometimes, it happens that the official language is yours, but you go to rural areas where the population couldn't have access to an education and only speak local dialects. We can easily think about solutions for

a better communication, it includes having someone translating everything, but even with this bias, we couldn't assure that the translators will understand the western medical terms that aren't used in developing countries (Wall, 2011). Those misunderstandings could risk patient life.

To keep with the cultural differences, after the language barriers we can think about the religion gap. For example, in many Muslim countries, it is forbidden for a woman to be examined by a male doctor if she has to be undressed or in the other case, in some others cultures, men wouldn't let be treated by a medical volunteer is it is a woman (Wall, 2011). Bauer remembered that volunteers tend to forget that everything isn't like at home and that they should embrace local culture before arriving, from a cultural or an even a legal aspect (Bauer, 2017, p. 3). It is really easy to do something that will be illegal without knowing it. In some countries, even smoking or drinking in a public area is a crime.

The issues of cultural differences are huge. Another example is linked to the lack of knowledge of the medical volunteers on the countries and population they are going. Imagine being treated for a pain and being administrated ibuprofen that the medical volunteers exported. But the dosage is to take the pill, three times a day during meals, something that is logical and easy to do for people from develop countries. But in the case of a medical volunteering in a developing country, the medical volunteer should know that the patient doesn't always have three meals per day and warn them to not take it on an empty stomach, or it can cause stomach ulcers. And even if the medication have a notice, they probably wouldn't be able to read it due to lack of translation or illiteracy (Bauer, 2017, p. 3).

Another challenge encountered by the medical volunteers is about their own health, in fact, burden are recurrent situations and can be really difficult to face for those who have them. Research on that topic have been made in 2013: "Burden experienced by community health volunteers in Taiwan: A survey" . Below you could find the listing made by the authors of all the factors that have been reported by

community Health Volunteers and examples of sentences said by actual volunteers reporting on their burden experiences :

- “Work related to the physical and emotional nature of the role
  - “I feel the presence of fraudulent groups in Taiwan makes my role as a community health volunteer more difficult” (Gau *et al.*, 2013, pp. 4-5).
  
- The time taken to undertake the activity
  - “I feel the difficulties associated with achieving the required paper work impact on my role” (Gau *et al.*, 2013, p. 5).
  
- The insufficient emotional support from the family
- Others volunteers
  - “I feel the lack of volunteers makes my role more difficult” (Gau *et al.*, 2013, p. 4).
  
- The community health nurses and residents
  - “I feel the low participation by the community residents in planned healthcare activities impact on my role” (Gau *et al.*, 2013, p. 4).
  
- The lack of instrumental support
- The poor communication skills
- The lack of cooperation
- The lack of confidence” (Gau *et al.*, 2013, p. 2).

As we can see, a big part of the burden factors are linked to the challenges we described earlier. These challenges can be really difficult to undertake for some persons. Even if we are aware of it, it is possible to feel their consequences. Another aspect pointed was the insufficient emotional support from the family, this can be really difficult to be abroad, in a place far from everything we know and with no family to rely on. Plus, for some reason, volunteering is still perceived as dangerous and a lost of time by some persons. Not everyone can have a family that provides a good support. Others volunteers and community health nurses and residents can also

be a factor of burden because it does include living with them and spending all our time with them. There is not a real break from work and lifetime, that can be difficult to handle. Without forgetting that, unfortunately, there is a lot of psychological and physical assault in the humanitarian field. (Gau *et al.*, 2013, p. 2) Furthermore, it is really important to keep volunteers away from burn out, “Burden on accepted component of burnout can be avoiding or ameliorated if detected early” (p. 2) (Gau *et al.*, 2013). Some consideration should be taken to avoid burn-out as, for example, have a leader that makes sure volunteers are not doing too many hours to not feel burden and overwhelmed (Gau *et al.*, 2013).

#### **4.5. Giving some responses to avoid the excesses and prepared the volunteers**

After trying to understand if short-term medical volunteering is sustainable and seeing some challenges that can be met by the volunteers, we are going to figure some responses to avoid the maximum amount of issues for the population.

Something that seems to be basic yet not for everyone, future medical volunteers should contact others volunteers that leave with the organization they plan to leave with, they should collect testimony to have different points of view about the leaving organization. They can also ask questions about the life on the field, how it works, if they personally met cultural challenging or other challenges. It is really important to be well-prepared before living. Asking questions is a way to have a first perception of the places. The person's previous volunteers could give their recommendation, and help the future volunteers to avoid certain situations that could be uncomfortable (Wall, 2011).

It is also really important for medical volunteers to remembered that they are going to give care to human being. They will have responsibilities and should not feel untouchable. Every placement organization should make the volunteers signed a contract that will specify that they have the fully responsibilities of their actions and that it will be consequences even after they returns in case of any abuse or lack of good care.

Sending organization and local organization should always partners short-term volunteers to with local medical staff because they will be less capable of doing things wrong, like organizing deworming campaign in a rural place with no access to drinkable water and a high risk of the campaign failing. Their impact can be efficient but they need to match the community's needs. The need to work directly with locals is also to avoid the repetition of the work because they couldn't know if there is something that has already been done. Some long-term volunteers in the study

“Perceptions of short-term medical volunteer work: A qualitative study in Guatemala,” said: “Always keep in mind that you are there to provide the best possible care for the patient [...] do things because the patient needs them, not for your own experience” (Green *et al.*, 2009,p.10). It is so important to remember that if you want to do short-term, it is to provide health care, not to experience some life challenges with a poor population (Green *et al.*, 2009).

There is good example of positive medical volunteering, in there research work Yuch-Mei Gau, Petra Buettner, Kim Usher and Lee Stewart did a survey in a Community Health Program in Tawain to understand with the point of view of the local the impact of the Community Health Volunteers. In this program they have three different level of volunteering: the “fundamental” volunteer that is just arriving, the “Cadre” that have more experience and is capable and the “Leaders” that is the most experienced volunteers. This hierarchical structure is made to control the work that volunteers do. The most experience in health field they have, the most difficult thing will be ask them to make. In order to became a volunteer they need to be nominated by the leader of a local community association and they have to attend volunteer training courses, only after achieving this, they will be affected duties by the leader of the center. The two first stage are usually only doing health promotion, not any medical cares. The volunteers are always working with local health workers, they are there to support, not to replace doctors. (Gau *et al.*, 2013) The head of the community health program as an oversea on all the volunteers work to make sure everything is respected. They are leader in their own community so they know what the community needs (Gau *et al.*, 2013).

Every NGO or organization that are sending medical volunteers should organized volunteering training before sending them on the field. As the example of the Portuguese organization Pista Magica (figure 5.).

## A Associação

A **Pista Mágica** é uma associação sem fins lucrativos, reconhecida como Organização Não Governamental para o Desenvolvimento (ONGD) que acredita no vasto potencial do voluntariado e da cidadania ativa enquanto caminhos para a transformação da sociedade.

Sendo a **primeira Escola de Voluntariado em Portugal**, lançada em julho de 2008, é um projeto de inovação social, composto por elementos com uma ampla experiência e competências na área, de universos complementares e valores comuns.

Em treze anos de atuação no terreno e de criação de conhecimento, crescemos – em tamanho, no alcance e na vontade de cumprirmos uma Missão que tem vindo a ganhar novos contornos: a de contribuirmos para **uma maior cultura de voluntariado e cidadania** – consciente e comprometida – em Portugal e no Mundo.

Procuramos reinventar-nos e, hoje, não somos apenas uma Escola, mas também uma organização pronta a operacionalizar e gerir programas de voluntariado.

O caminho, que não cessa, faz-se das mais de **30.000 pessoas** capacitadas, **16 projetos implementados** (a nível nacional e internacional), **11 livros e manuais publicados** e de uma equipa comprometida a continuar a fazer crescer asas por um mundo mais atento e voluntário.

Figure 5. Description of the Association Pista Magica. Source: Pista Magica,

Translation made on Deepl.com :

“**Pista Mágica** is a non-profit association, recognised as a Non-Governmental Organisation for Development (NGDO) that believes in the vast potential of volunteering and active citizenship as paths towards the transformation of society.

Being the **first Volunteering School in Portugal**, launched in July 2008, it is a project of social innovation, composed by elements with a wide experience and skills in the area, of complementary universes and common values.

In thirteen years of work in the field and in the creation of knowledge, we have grown - in size, in scope and in the will to fulfil a Mission that has been gaining new contours: that of contributing to **a greater culture of volunteering and citizenship** - aware and committed - in Portugal and in the World.

We have tried to reinvent ourselves and, today, we are not only a School, but also an organisation ready to operationalise and manage volunteering programmes.

The path, which does not stop, is made by the more than **30,000 people trained, 16 projects implemented** (nationally and internationally), **11 books and**

**manuals published** and a team committed to continue to grow wings for a more caring and voluntary world.”

Another example of a more positive approach of the medical volunteering, we can take the example of the Universal Solidarity to promote a sustainable volunteering. In order to understand better what I am talking about, I will explain the project.

The Universal Solidarity project is a Co-responsibility project of the Council of Alliances of the Together network that is aiming the issues of climate change and international development. It has been launched in June 2022 during a working group at the 2<sup>nd</sup> Congress on Humanitarian Action and Development Cooperation. The Congress was a response to the Appeal for Co-responsibility that was send to the Secretary general of United Nation in 2022. The Universal Solidarity project is far from the paternalistic vision or philanthropy, the aim is to learn from each other by creating sustainable partnerships.

Following the Universal Solidarity point of view, we could create sustainable partnership between universities or hospitals in two different parts of the world and promote the exchange of cultural knowledge that will be a real change and, for example, could contribute to the reduction of stereotypes and reduce the risk of cultural differences issues.

#### **4.6. Conclusion of the academic study**

Medical volunteering can be a life changer for some rural areas where basic care isn't easily accessible for the population. However, without supervision, this can become counter-productive and cause irreversible damage to the beneficiary populations. It is important to understand the profiles of these volunteers and their real intentions before they are placed. It is just as important for future volunteers to choose a placement organization that is respectful and that will not seek to make a profit on the backs of vulnerable populations.

In order to achieve sustainable and harmless results, it is important that volunteers are able to give care because they have practice and experience. It is no longer tolerable to have volunteers experimenting with care or medical practices without being trained or even taking into account the cultural differences they will face.

Fortunately, some organizations have been set up to limit abuses in humanitarian volunteering by providing pre-departure training to ensure that volunteers are well-informed about sustainable volunteering practices.

Because medical volunteering is not just a line on a CV, but a real life experience, it is more than important that volunteers are prepared to live in different conditions, to respect the work of local employees, and above all, to bring their knowledge and time to the people who need it in ways that are respectful of people and sustainable.

## **General conclusion**

Climate change is a real issue that we cannot continue to ignore. In 2023, more than ever before, we are facing all the consequences of years and years of global industries carbon footprint. Every environmental disaster is multiplied and exacerbated like the flooding, the forest fire, the tsunami, the drought, the disease outbreaks... And if we all are victims of these hazards, some are all the more so because they lack the financial or technological means to overcome these disasters. Fortunately, humanitarian aid is always present to support these populations who are victims of the repercussions of the over-exploitation of our Earth. However, this aid is not always carried out in the most healthy and sustainable way possible. Many financial, human and environmental abuses have been committed. Despite this, one should not make generalizations and many associations and organizations are there to work in the best possible way while protecting the populations and the environment. This is the case for the TOGETHER Network, which aims to change mentalities, to help everyone become aware of their impact on the planet, to take simple but effective measures to change their harmful habits. But also on the other hand, the network seeks to improve international cooperation by proposing trustworthy partnerships and a fair distribution of financial aid.

Working in this network during my internship allowed me to discover new ways of thinking and defining international cooperation. I was able to exchange with cape-verdean partners and discover this solidarity that no longer exists in the so-called Northern countries.

It is in this sense that I wanted to write an article that seeks to question the sustainability of medical volunteering by looking at the different profiles that practice it, as well as the drifts. But it was important for me to highlight the initiatives of

organizations to make this volunteering as healthy as possible, both for the volunteers and for the populations who are the main victims of the abuses. It was therefore natural for me to include the Universal Solidarity project of the TOGETHER network in these innovations since it perfectly combines respect for the populations, sharing of knowledge, sustainable development and respect for the environment.

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