

ORIGINAL RESEARCH ARTICLE

“Using My Tools for the Goodness of the World and Making a Difference”: HQHVSN Veterinarians on Remote-Area Volunteerism and the Impacts of Spaycations

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Abstract

Introduction: Veterinarians skilled in High Quality High Volume Spay Neuter (HQHVSN) are frequently invited to volunteer their surgical services in distant low-resource communities on trips casually known as “spaycations.” This research explores HQHVSN veterinarians’ motivations for choosing whether or not to participate in spaycations and their perceptions of the impacts these clinics have on communities they visit to answer the research questions “why do HQHVSN veterinarians go on spaycations?” and “are spaycations a good thing?”

Methods: Veterinarians who work in or are trained in HQHVSN were invited to complete an online questionnaire containing open-ended questions relating to their thoughts and experiences regarding spaycations. Respondents were asked to discuss their perceptions of spaycations’ impacts on the volunteer veterinarians themselves as well as on the animals, clients, communities, veterinary practitioners and animal populations in the areas visited. A reflexive thematic analysis was conducted in which the veterinarians’ responses were coded inductively for semantic themes using a critical realist approach.

Results: Forty-three veterinarians responded to the survey, and over two-thirds (30/43; 70%) had been on spaycation. Most responding veterinarians were motivated by a desire to make a difference and give back to communities in need as well as the desire to travel and to experience other cultures. Thematic analysis generated four main themes: *HQHVSN is a special skill set; spaycations are expensive; “I don’t have data but...”: the uncertain population impact of spaycations; and colonialism is an ever-present risk.*

Conclusion: This study’s findings show that for veterinarians, spaycations can be an opportunity for altruism that also enriches their work as veterinarians and as HQHVSN practitioners. However, study themes highlight some potential pitfalls of spaycations including the pressures placed on volunteers, the high cost of spaycations, the questionable or un-evaluated efficacy of spaycation clinics and the potential for colonialism and “savior” attitudes. The compelling nature of these trips necessitates conscientious and culturally-sensitive leadership and planning to provide safe, sustainable, community-centered programs with a focus on long-term solutions.

Keywords: *HQHVSN; spaycation; volunteer; voluntourism; spay; neuter; colonialism; mentorship; reflexive thematic analysis*

Received: 23 August 2025;
Revised: 5 October 2025;
Accepted: 5 October 2025
Published: 21 November 2025

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Reviewers

Brendan Bergquist
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Supplementary material

Supplementary material for this article can be accessed here.

Veterinarians skilled in High Quality High Volume Spay Neuter (HQHVSN) are frequently invited to volunteer their surgical services in distant low-resource communities. These volunteer-dependent remote-area spay neuter programs have become casually known as “spaycations,” a term used throughout this paper to represent these projects. Spaycations vary greatly in number of volunteers, cost to volunteers, frequency of clinics in the target community, additional veterinary services provided, teaching responsibilities for volunteers,

expected surgical load and stated or unstated goals. Some spaycations require a fee of thousands of dollars for veterinarians to participate,^a while others receive sponsorships to cover on-site expenses,^b and still others have funding to cover travel expenses as well as on-site expenses for volunteer veterinarians.^c Some spaycation programs, focusing

a. <https://worldvets.org/volunteer/upcoming-projects/> accessed 12/27/24
b. <https://www.worldwide-vets.org/Projects/operation-ukraine> accessed 12/27/24

c. <https://greatergood.org/good-fix#volunteer> accessed 12/27/24

on surgical output, seek only volunteers with HQHVSN experience.^d Other spaycations have an educational component designed to teach surgical techniques to veterinary students and provide surgical experience to veterinary practitioners who do not have HQHVSN experience. In some cases, the educational component is clearly defined with competency-based tiers determining learner task assignments,^e although this amount of oversight and supervision is not universal.

Host communities for spaycations vary, but by definition these communities have limited access to financial and veterinary resources. Most if not all spaycation host communities have been or are still subject to colonialism, or “the combination of territorial, juridical, cultural, linguistic, political, mental/epistemic, and/or economic domination of one group of people or groups of people by another (external) group of people.”¹

Spaycation goals

Few spaycations specify outcome goals or criteria for success. Some report the number of procedures completed or number of clinics organized as indicators of program “success,” without considering population dynamics or measurable impact on animal or community health or wellbeing. This lack of impact assessment is not unique to spaycations. Indeed, failure to assess impact is common among subsidised veterinary services, despite the substantial financial and human resource costs of these programs.²

Remote-area spay-neuter programs affiliated with veterinary schools and involving students as part of the veterinary school curriculum appear to be the best evaluated remote-area spay-neuter interventions. One of most studied is the Northern Community Health Rotation (NCHR) of the University of Calgary Faculty of Veterinary Medicine, a clinical year veterinary student rotation held annually to Indigenous communities in the Northwest Territories of Canada, providing medical and surgical care to dogs. Evaluation of the program has been thorough and multifaceted: Faculty have published research evaluating effects of NCHR on dog health and welfare,³ changes in Indigenous perspectives on dogs over the course of the NCHR,⁴ veterinary student perspectives and ways to support student learning^{5,6} and exploring the experience of visiting veterinary service providers in Indigenous communities in this and other Canadian veterinary school programs.⁷

Remote volunteer medical programs in human healthcare

While international and remote area volunteerism in the veterinary field has received little attention in the

peer-reviewed literature, the last two decades have seen numerous articles researching, discussing and critiquing short-term international human medical volunteerism. Some articles highlight the benefits of medical volunteer trips for visiting medical providers and for local community members: visiting doctors described trips as opportunities to reconnect to the reasons why they became doctors, and local people reported a sense of hope and solidarity.⁸ Much of the criticism of these programs in the literature focuses on concerns about ethics and the potential for individual patient harm, as well as structural inequality and the concern that many current programs fail to discuss or confront systemic factors relating to global poverty.^{9,10} Specific patient safety concerns include the perception of a double standard within some programs, in which the care provided is a substantially lower standard of care than in volunteers’ home countries, leading to patient harm with no follow-up care or recourse.^{10,11} Further concerns for patient welfare include practitioners working outside their usual scope of practice, and students working with less supervision than they would receive in their home institution.¹² Programs have also been criticised for allowing the pressure for high case numbers to trump patient safety¹¹ leading to patient harm.

Critiques have also raised concerns about the potential for harm within the host communities. Volunteer clinics may compete with local medical services and providers, and may use the scarce local resources that would otherwise be used by local providers.⁹ Multiple critiques expressed the concern that the money spent by medical volunteers to participate, often thousands of dollars per person, may have been better spent on funding and improving the medical system in the local community.^{8,10}

Why Spaycations?

To date, there has been no research on HQHVSN veterinarians’ motivations for choosing whether or not to participate in spaycations and their perceptions of the impacts these clinics have on communities they visit. As an HQHVSN veterinarian myself, I have become increasingly aware of spaycation opportunities over the past decade but had remained ambivalent. I am at once drawn by the desire to do good works and be needed, suspicious of my own potentially selfish motivations, and uncertain of the efficacy and cultural equity of the programs themselves. These conflicting observations led to two research questions for this project: 1. Why do HQHVSN veterinarians go on spaycations? and 2. Are spaycations a “good” thing?

Methods

Data were collected using an online survey of HQHVSN veterinarians. An online survey was chosen for this qualitative research study due to its flexibility, accessibility and ease for participants and for the researcher, allowing

d. <https://greatergood.org/good-fix#volunteer> accessed 12/27/24

e. <https://humanepro.org/ravs> accessed 12/27/24

asynchronous responses from geographically scattered participants and offering participants the opportunity to share as much or as little detail as desired in a thoroughly anonymous setting.¹³

For this research a “Spaycation” is defined as:

1. Unpaid or minimally paid trip (may or may not include travel expenses, food and accommodation; stipend, if any, amounting to less than 25% of expected day rate for HQHVSN surgeon)
2. From a high resource area to a low or moderate resource country or area (often another country, but may include Indigenous communities or reservations, or territories or colonies controlled by the surgeon’s own country)
3. To provide spay neuter services (may include additional animal wellness services, but the focus is spay neuter)
4. Organised by someone other than the individual surgeon

Participation was limited to veterinarians who work in shelter or spay-neuter (HQHVSN) practice or who are trained in HQVHSN, and was open to veterinarians whether or not they had been on a spaycation trip. Survey responses were anonymous: No identifying or demographic information was collected about the participants, and IP addresses and email addresses were not collected. Participants were informed that the survey was for research purposes and that their anonymous responses may be used in publications and presentations that result from this research. The first survey question required participants to confirm their eligibility and to give consent for their responses to be used in this way. Institutional ethical review was not required for this study.

The survey questionnaire consisted of open-ended questions about participants’ thoughts and experiences regarding spaycations and their perceptions and assumptions about spaycation impacts on the volunteer veterinarians themselves as well as on the animals, clients, communities, veterinary practitioners and animal populations in the areas visited. The survey contained skip logic so that certain questions were asked only of those participants who had been on spaycation, and other questions only of those who had not been on spaycation. Both versions of the survey are available in the Supplementary material.

The survey was designed using a commercial survey plugin for Wordpress^f and hosted on the author’s website. Survey questions were developed based on interview questions used in a previous qualitative research study exploring perceptions of short-term medical volunteerism in human medicine,¹⁴ which were then modified to

incorporate veterinary medical and One Health concerns. An early version of the survey was reviewed and critiqued by a veterinarian experienced in qualitative research in shelter medicine, and the survey was revised and condensed according to these recommendations. The final version of the survey was pilot tested by a veterinarian working in HQHVSN who had been on spaycations who suggested no further modifications.

An invitation including a link to the survey was posted by the author to the private, veterinarian-only Facebook groups “HQHVSN Veterinarians” and “Shelter Medicine Veterinarians.” The invitation encouraged those who read it to share the link with other veterinarians who might be interested in responding. Responses were collected between 1/10/24 and 7/26/24 and were downloaded into Microsoft Excel and converted to Microsoft Word for coding using the comment function of Microsoft Word.

Data were analysed using reflexive thematic analysis using a critical realist approach.^{15,16} Data were coded for analytically relevant features at both semantic (descriptive) and latent (interpretive) levels. Once coding was complete, coded excerpts were extracted into Microsoft Excel using a macro.^g Coded excerpts were re-read, minor spelling errors within the excerpts were corrected and codes were refined and grouped as candidate themes were generated. When discussing themes in this manuscript, numerical counts for theme frequency were avoided in keeping with the qualitative framework of reflexive thematic analysis.¹⁶ The initial analysis was presented to a group of shelter medicine practitioners,^h and audience comments and questions were used to inform further theme development and refinement.

Reflexivity

As an HQHVSN veterinarian, I am conducting this research as an “insider,” and participants were likely aware of this because the survey link was shared only in HQHVSN groups and my identity and links to my website were on the invitation and survey itself. Many participants were likely personal friends, colleagues, or co-participants with me in previous spaycations. This insider status may have given me perceived credibility and affinity, encouraging participation and prompting more open responses than if an unknown person or non-HQHVSN-veterinarian had conducted the survey. Conversely, in some cases my status or identity may have limited their sharing of certain types of information or may have discouraged participation.

My personal experience with spaycations is limited. I worked as a paid consultant at the Spayathon for Puerto

g. Babbage DR, Terry G. Thematic analysis coding management macro. doi:10.17605/OSF.IO/ZA7B6.

h. American Board of Veterinary Practitioners annual convention, New Orleans, 26 April 2024

f. Survey Maker Wordpress Plugin, <https://ays-pro.com/wordpress/survey-maker>

Table 1: Themes and subthemes related to the research questions in this study.

Themes	Sub-themes
HQHVSN is a special skill set	Supporting the special skill set Threats to the special skill set
Spaycations are expensive	
"I don't have data but...": the uncertain population impact of spaycations	
Colonialism is an ever-present risk	Colonialist attitudes and actions Saviorism and the "white savior" Colonialism is not a foregone conclusion

Rico clinics during rounds 2 through 5 in 2018 and 2019, and as a volunteer during round 6 in 2020. Later, I participated as a volunteer in the Operation Sato clinic in Puerto Rico in November 2023 during the conceptualization stages of this research. These experiences informed my conceptualization and analysis, but inevitably led to preconceptions that required ongoing exploration and thought.

Despite my "insider" status among HQHVSN veterinarians, I am an outsider to the communities that are generally host to spaycations. As a privileged white English-speaking person living in a developed country, I have endeavoured to be cognizant of structural inequality and the history of colonialism in most spaycation venues and have approached this analysis with a decolonizing lens.

Throughout the conceptualization, design, implementation and analysis phases of this research I kept a reflexive journal of my thoughts, concerns and experiences related to spaycations and the literature on "voluntourism" (volunteer tourism, or "traveling with a purpose"¹⁷), service and equity in the human and animal fields, and of the process of reflexive thematic analysis.

Results and Analysis

Forty-three veterinarians, coded as 1–44 (the number 41 was not assigned), responded to the survey, and over two-thirds (30/43; 70%) had been on spaycation. Respondents had participated in a variety of spaycations around the world over the past 20 years. Most responding veterinarians were motivated by a desire to make a difference and give back to communities in need as well as the desire to travel and to experience other cultures. Many enjoyed bonding with and learning from other vets and team members on the spaycation, and said that while the trips were exhausting they were also paradoxically energizing, and that they renewed their professional passion. Many veterinarians were concerned by the financial and time commitments associated with participating in spaycations, and these costs had prevented some veterinarians from participating. Further reasons for not participating in spaycations included concerns about stress and

burnout and about the continual expectation for veterinarians to volunteer their time. Some veterinarians presented concerns about spaycations producing damaging interactions with the local communities including cultural misunderstandings, distrust, the creation of dependence, colonialism and White Savior syndrome. Local involvement in the spay neuter event varied, with some events entirely planned and staffed locally and involving training and mentorship of local veterinary professionals and students, while other spaycations included little local involvement. Veterinarians varied in their estimation of the animal population impact of the spaycation and agreed that recurrent or ongoing interventions are necessary for appreciable and sustainable population impacts, but that health impacts on individual animals and their families were important and visible even after a single trip.

Thematic analysis generated four main themes (Table 1) related to the research questions of "why do HQHVSN veterinarians go on spaycations?" and "are spaycations a good thing?": *HQHVSN is a special skill set*; *spaycations are expensive*; *"I don't have data but...": the uncertain population impact of spaycations*; and *colonialism is an ever-present risk*.

HQHVSN is a special skill set

"I think each person that has this special skill set should try to take a trip to somewhere to do this. I can't think of any negative things that I can point a finger to. It's giving love and light to a community that [is] struggling in that area" (P14)

Supporting the special skill set

Central to many participants' accounts was their high esteem for their skills in HQHVSN and the importance of community and camaraderie among HQHVSN professionals. Together, the skills, the skilled individuals and the community of skilled people are viewed as special, unique, valuable and worthy of protection. For these veterinarians, HQHVSN's special skill set was an intrinsically valuable gift given to the spaycation host community. As one veterinarian summarised, "I am fast and I feel like

my skills really can help in an underserved area” (P8) and another described “using my tools for the goodness of the world and making a difference.” (P15)

Many veterinarians described spaycations as helping them “maintain professional motivation/passion” (P1) by providing a different context in which to practice their special skill. Some veterinarians experienced spaycations as simple, basic and pure because their spaycation experiences lacked the frustration of competing demands, interpersonal conflicts and decision-making responsibilities of everyday shelter or HQHVSN practice.

After two years as medical director of a high quality high volume spay/neuter clinic I was burnt out. Constant fighting with a string of executive directors over staffing, numbers, idiotic board decisions left me wanting a more “pure”, untainted by the all mighty dollar animal welfare experience. (P43)

In essence, for these participants, spaycations were able to strip away the troublesome aspects of their day-to-day work and allow them to experience the fulfilment of altruism simultaneous with the flow of performing a physical task with expertise: “There is something so great about being so focused on one thing, there is no outside world or to-do list pulling you in many directions” (P40). For some, this different practice environment is a transformative respite: “It is how I recharge, give back, one of the only things I do professionally that makes me glad I became a vet.” (P11)

Many participants enjoyed meeting, learning from and working alongside other HQHVSN veterinarians, although this was rarely among their primary motivations to go on spaycation.

It also allowed me to make connections with other HQHVSN vets from all over the world, relating on a deep level and sharing skills, tips and tricks. And all of this while experiencing a new country and culture. It was one of the best parts of that experience and I have made lifelong connections and gained so many additional resources and skills from it. (P28)

Opportunities for such camaraderie and mutual learning are rare in HQHVSN, particularly among those working in small organizations. HQHVSN practitioners are geographically scattered, and working together as a team with other skilled HQHVSN surgeons on spaycation is one of the few ways that these practitioners have to meet in person, form bonds, share techniques and create community.

Threats to the special skill set

Some participants described certain types of spaycations, or certain aspects of spaycations, as threats to the well-being of the HQHVSN practitioner and the HQHVSN community as a whole. Objections focused on practitioner burnout, the devaluing of HQHVSN practitioners and their work and the inappropriate pressures placed on

HQHVSN workers and work systems by certain types of spaycations. As one veterinarian put it, “Since I do S/N all day every day, it’s kind of the last thing I want to do for free” (P9). Others saw the pressure to participate in spaycations as typical of the ongoing pressures on veterinarians to work for free: “I think as vets, we’re always asked to volunteer our time and do more and more and that leads to burnout” (P17). This concern about burnout and devaluation was echoed by others: “I think asking vets to volunteer for these trips is probably contributing to HQHVSN vets being undervalued, in a profession already undervalued and burned out” (P35).

A few respondents expressed concern about the push for high surgical numbers on some spaycations and the implications for animal safety, veterinarian mental health and the integrity of HQHVSN practice. As one vet states, “I’m concerned the impacts on young vets and students may be an internalization to do more and more since it appears some trips are driven by the quantity of S/n done” (P18), and another describes that in their experience “I feel as though sometimes it becomes a competition to see who can work faster and sometimes I feel like animal safety was sacrificed for speed” (P32). This pressure to work faster and do more can be counteracted by clinic leadership focused on establishing safe, high-quality systems rather than focusing on high-number outcomes:

I want to mention...that it is humbling to learn that we are not going to do as many surgeries as you can do. It is important (very important) to make this a point to whomever participates. It is a priority to do a good job than a fast job. Quality is much more important than quantity. I learned in these clinics how high volume vets feel the pressure to do a lot of animals (they are already doing a lot as it is) and they feel bad when the numbers are not what they expect. I reiterate the importance of NOT feeling rushed. As I tell the vets, the expertise is not in the numbers but in the quality. (P15)

This respondent uses their understanding of the HQHVSN community to acknowledge and counteract the potentially problematic internal and external pressure for speed and productivity experienced by HQHVSN veterinarians. This respondent’s perspective as both a HQHVSN veterinarian and as a co-leader of spaycation clinics enhances their ability to empathize with participating veterinarians and guide their expectations in a way that fits with the program goals.

Spaycations are expensive

Many participants commented on the myriad ways in which spaycations are expensive. Veterinarians and staff must travel to the clinic location where they will require food and lodging. The clinic venue must be set up and medical equipment and supplies must be acquired. In some cases these direct costs are covered entirely by the visiting veterinarian via a fee to volunteer: “some of the

organizations...charge a weekly stipend to go and it is many times in the thousands of dollars. I am already paying my way to go there, paying for food and many times other transportation costs and can't justify another large charge" (P11). In other cases all or part of these direct expenses are paid by the host or sponsor organization, typically funded through grants or donations.

Other costs are indirect: Veterinarians who work per diem lose their income when they travel on spaycation. Those working full-time often use their vacation paid-time-off for spaycation, and thus sacrifice the opportunity to use this time as a restful vacation or as a break from veterinary medicine. For some, this sacrifice of scarce vacation time is enough to discourage them from going on spaycation: "I don't want use my limited, difficult to get, vacation time to go work somewhere. I especially don't want to use my vacation time to do more of what I do every day at work" (P17).

A further indirect cost of spaycation is the potential interruption of services in the participating veterinarian's home community, decreasing access to veterinary services in that community and impacting their employer's ability to provide care. As P31 describes, there would "be a financial impact- both in terms of direct travel expenses incurred and lost wages. For my own organization the impact would be lost revenue and services from needing to be closed or reduced services if I am gone during our scheduled days." As another participant summarizes, going on spaycation "means I am not helping animals in need in my own community, and not getting paid." (P35)

An additional cost of spaycation can be in the physically demanding nature of this work and the toll it takes on participants' bodies. Some veterinarians who had previously participated in spaycations became reluctant because "the working conditions are difficult and I am getting older so this physically affects me a lot more" (P23). Participant P30 concurred, stating:

"I am concerned about the physical impact of doing spaycation. My body physically hurts from full time spay/neuter at home.... and that is with cushy floor mats, adjustable tables and a comfy bed to sleep in at night. I worry how my body will handle doing surgeries under less than optimal ergonomic conditions."

This participant chose to travel on spaycation but mitigated the physical costs by paying for their own lodging during the event rather than stay in the crowded shared accommodations provided and paid for by the spaycation hosts.

Some participants propose that a solution to the high cost would be for veterinarians and skilled staff to be paid to participate in spaycations, arguing that "The same effect [on animal welfare in low-resourced areas] can occur while offering staff fair pay for their work via grants and other funding opportunities" (P21). This proposal would better

reflect the true financial cost of spaycations, as the current model distributes the cost between volunteer staff's direct expenses, the value of their time and labor and the direct expenses incurred by the spaycation sponsor and/or hosts.

However, others note the already insufficient funding for their sponsoring organizations to return to remote communities as often as they would like:

one of the negatives is that we'll go to a village and not be back for like 5 years. So, we're not someone who can do any follow up care except remotely. Also, I can see how they [locals] could potentially see us as people who show up once to feel good about ourselves but not coming back enough to truly help. Unfortunately, these trips are expensive for the organization so can't be done too much (P19)

To this participant, inadequate funding is an important limitation not only in the frequency of spay clinics or the amount of service provided, but also in the locals' impressions of the volunteers and of the organization as a whole. Transitioning to a fully-paid model for spaycations would likely exacerbate these limitations.

"I don't have data but...": speculation around the population impact of spaycations

For some participants, the impact of spaycations is self-evident: "I don't have data but reducing the amount of intact animals would automatically lead to a decrease of unwanted puppies/kittens" (P44). Others are unsure about the impact of clinics on population size and structure, and a few counter the assumed efficacy with a call for research: "it seems like a geospatial and mathematical analysis could really improve the focus and extent to which services might be needed. But that doesn't seem to happen" (P2). Some who recognize the lack of science evaluating the impact of spaycation clinics continue to see value via the positive effects on individual animals and families: "Few places actually are conducting the science to track those numbers. But regardless of that I know that we are making a difference for that individual animal and the person/people who care for it. And that is enough for me." (P4)

Participant P42 expands upon the difficulty of serving adequate numbers of animals to make a change in the animal population size and structure:

In my opinion, it is the rare spaycation that makes any real direct difference in the population of animals being served -- the numbers and level of commitment and investment would need to be exponentially higher] I would prefer to see some long term investment in training local professionals and minimizing the size of teams coming into the area whenever possible. In some areas, particularly if there are NO vet services to grow locally, these programs are a reasonable option. But again, I think every resource should be carefully calculated to have the most benefit with the least cost or negative impact. (P42)

This participant acknowledges the fact that the high cost of spaycations typically precludes success in population management, and advocates instead for investment of time and funds in local infrastructure and training local professionals. They recognize the potential for negative impact on local communities and advocate a thoughtful balancing of the potential harms and financial costs with calculated benefit. They go further to imply that spaycation-type programs that do not include the implementation of local training and investment in local spay-neuter capacity may only be a “reasonable” option when there are no local veterinary services to grow and support.

Many participants agreed that “spaycations are not long-term solutions without developing local infrastructure” (P24). As participant P40 describes, “I think these trips are a shotgun approach to veterinary care. Basically for one week we are spay/neutering hundreds of animals and getting in as many vaccines as we can. We are able to do a little more for some more complicated cases but not much. But then we are gone for another year and there is no veterinary care.” The use of the term “shotgun approach” here implies something haphazard whose effects are unknown and uncalculated, the opposite of the targeted spay and neuter programs known to be associated with successful population control.¹⁸ In this description, the implied harms of the spaycation approach are the abandonment of the clients and animals every year (with ensuing lack of access to care) and the potentially scattershot way in which services are provided.

Participant P15, who has participated in spaycation-type clinics as a veterinarian and organizer, advocates for smaller, consistent clinics staffed primarily by local providers:

I do think the clinics help, but mostly if they are smaller, consistent and with local staff. Having big clinics providing everything for free is not as efficient financially as it may seem To do surgery for 1000 animals in one year is not going to make as big of a difference as a local clinic doing 50 animals every week. [It] is better to provide consistent clinics than a one-time, big number clinic.

To this participant, the large clinics staffed by non-local veterinary staff and volunteers fail to provide the financial and logistical efficiency and the surgery numbers that a frequently recurring or permanent locally-staffed clinic can offer. In this participant’s view, the regularity and efficiency of local clinics allows clients predictability and greater access to care, and reaches more of the animal population.

Colonialism is an ever-present risk

Some participants expressed concerns about the power and wealth differentials and the racial, cultural or ethnic differences between the visiting veterinary teams and the

spaycation host communities, and the resulting potential for harm.

Colonialist attitudes and actions

Study participants varied in the degree to which they perceived persistent colonialist actions and attitudes to be a potential problem. For some participants, the attitudes of the spaycation volunteers and teams were key to avoiding harm:

Because of the makeup of the veterinary community, the clinics I have participated in have almost always reflected a primarily white spaycation team in a non-white community. I think this can be done with cultural awareness but is always in danger of slipping into paternalism, particularly if volunteers haven’t been provided some degree of training on the norms and expectations of the community in which they are working. (P42)

If they are done with high quality and respectfully then I think it can improve the relationship that the people have with local veterinary providers. If it is done with an attitude of superiority towards the locals, then it will lower the chances that they will come back and increase the chances they will tell others to stay away. It must be done respectfully. (P26)

Both of these participants promote the need for cultural awareness and respect, and describe the destructive potential of attitudes of superiority and paternalism. In both descriptions, the onus seems to be on the spaycation organisers to have appropriate attitudes, and to foster and encourage respectful, non-paternalistic attitudes in the rest of the team. The comment by participant P26 describes the potential harms of an attitude of superiority: that it will decrease acceptance of and participation in the spaycation program by the community, and potentially decrease community members’ acceptance of veterinary care in general.

Participant P38 expands upon the ways in which colonialist attitudes can manifest in the design and implementation of a spaycation program:

I think this depends on the group providing the services and how connected they are with the community and what their goals are. I’ve seen some groups actually cause more harm/distrust in the community because of various reasons - they just fly in and out a couple times a year without any involvement of the community, the group may be there for the wrong reasons (for the tax write off of their actual vacation), there may be negative interactions (poor cultural sensitivity) with the volunteers, etc. I’ve also seen how a community has inadvertently become completely dependent on a group providing veterinary services as the only option because there wasn’t the component of creating a sustainable solution/option in the community. (P38)

Three types of colonialist attitudes or actions are described in this quote. In the first example, the spaycation teams are using the spaycations to further their own self-interest without involvement or even input from the local communities. The spaycation becomes akin to an

extractive activity, in which the visiting teams receive a tax write-off, a vacation and perhaps a sense of self-fulfilment, while the desirability and value of the spaycation to local people, animals and communities is unexamined. The second example is cultural insensitivity and negative interactions with locals, as described previously by participants P42 and P26. The final example is the creation of dependency by failing to develop local and sustainable veterinary services.

In each of these examples, participants describe spaycation programs that act without acknowledgement or incorporation of the needs, insights and culture of the local communities. Here, paternalism is evident not just in the attitudes of the spaycation teams as described by P42 and P26, but in the entire structure of the spaycation programs. By structuring programs in such a way that the local communities are non-participants (example 1) or are made dependent on outside resources and intervention (example 3), the spaycation programs are perpetuating a colonialist-style dependency.

Saviorism and the “white savior”

A few participants were blunt about their concerns about the potentially self-serving and racially and culturally insensitive potential for spaycations. As one participant asks: “Why not use those resources to support the local vets and train them on HVHQS techniques? Seems like a bit of a white savior approach. I really don’t know if it is doing good or just making the people who do it feel good about themselves.” (P35)

The use of the label “white savior” connotes disapproval, implying a self-serving and ineffective way of providing aid. Jefferess¹⁹ distinguishes between the “white savior,” an individual mentality and set of methods and “saviorism,” an orientation and system of sense making within the global order. He defines the “white savior” as a self-interested (white) person without meaningful subject area knowledge or expertise who seeks to be the hero in a rescue narrative and desires self-fulfilment through providing aid or care. On the other hand, “saviorism” is an orientation, rooted in the colonial past, that defines the “fortunate” and the “needy” and establishes the power of those in the global North (i.e., “developed countries”ⁱ) to define the problems and delineate solutions and roles in the relationship.¹⁹ By these definitions, spaycations need not and should not operate with a white savior mentality, but they are often constructed within the orientation of saviorism.

A few participants specifically called out programs in which students are allowed to perform surgeries without

adequate training or supervision, an approach that seems to exemplify and encourage the white savior mentality:

Voluntourism (especially international spaycation or similar) or these trips where vet and undergrad students pay thousands of dollars for the chance to spay a dog in central America are areas where I worry the program is unlikely to have great local benefit, and potentiall[y] perpetuates a colonial model and does nothing to dismantle systemic oppression. I hear returning volunteers talk about these programs and hear a lot of savior language about helping the poor animals of poor people and nothing about the context in which those people and animals exist locally, nationally, and globally (P2)

This example describes a pervasive colonialist approach to international spay neuter and portrays programs that appear to exist simply to meet the demands of students from wealthy countries. In this description, the program does not appear to engage with communities to create long-term solutions, and does not appear to provide context and culturally relevant information to those who attend. The lessons learned by students on such a trip would only reinforce colonialist and “white savior” mind-sets: That the care provided to people in poor countries, or to low-income people in general, need not be high-quality. That it is acceptable for students to practice procedures on the pets of the poor that they would not be allowed to perform at their home college or veterinary school even under direct supervision. That they should be praised and proud for performing any service at all for these communities, and that the communities and individuals should be grateful.

Participant P19 reacted to a similar type of international spaycation program focused on student surgeries:

One of my growing concerns with choosing how I spend my spaycation time and money is sustainable inclusion of the communities served, as well as the financial implications for vet and tech students seeking to gain practical experience. If we want to recruit and encourage future animal welfare professionals from under-resourced areas that have connections to these communities and potentially motivation to provide ongoing services there, I have concerns with programs that have significant costs on top of the already very high cost of veterinary and vet tech education relative to prospective salaries. Bluntly, I don’t want to spend literally thousands of dollars of my own money and my free time to teach rich white kids on trips I couldn’t afford myself as a vet student. (P19)

This veterinarian advocates for involving local communities in creating sustainable solutions, and sees cost to students as a major barrier to inclusivity and access. They imply that a program that is truly committed to creating sustainable access to veterinary care worldwide would fund the cost of these training-and-service trips for veterinary and vet tech students from the host communities and from similar low-income or systematically disadvantaged communities.

ⁱ Hogan, Erica, Patrick, Stewart. A Closer Look at the Global South. Carnegie Endowment for International Peace. Accessed March 15, 2025. <https://carnegieendowment.org/research/2024/05/global-south-colonialism-imperialism?lang=en>

Colonialism is not a foregone conclusion

Despite these pitfalls and complexities, the perpetuation of colonialism within spaycation programs is not a foregone conclusion. Some spaycation participants described their experience of forming deep connections with the individuals and communities who hosted spaycations.

Most profound is being let into a community that I'd otherwise never have a chance to visit and people I'd likely not have the privilege [of] talking with about their lives and circumstances (due to geography and lack of trust of outsiders). Using the lens of animals I've heard so many heartbreaking stories of the results of systemic oppression on a culture and people (drugs, violence, poverty, early death from chronic diseases) but also the intergenerational supports, re-learning tribal languages and getting to learn about some of the roles that dogs (for example) play in their cultures and spiritual practices beyond the typical human-animal bond. Because this group goes back to the same communities year after year, and because of the emphasis on transparency of the process, I've learned a lot about the local impacts of historical trauma specifically around delivery of medical care, and really tried to better educate myself on indigenous current issues and local histories of the areas I visit. (P2)

The deep connection described by this participant was the result of many years of participation in spaycations in a group of communities that was actively engaged in the direction, development and ongoing operation of the spaycation program. In this anti-colonialist project, local communities were able to define their own needs and shape the services that the spaycation teams would provide.

Discussion

The initial questions in this analysis were 1. “why do HQHVS veterinarians go on spaycations?” and 2. “are spaycations a “good” thing?” Thematic analysis of veterinarians’ responses identified four themes: *HQHVS is a special skill set; spaycations are expensive; “I don’t have data but...”: the uncertain population impact of spaycations; and colonialism is an ever-present risk.*

To answer to the first research question of why HQHVS veterinarians go on spaycations, participants’ responses were centered around altruistic and pro-social impulses. HQHVS veterinarians place high value on the benefits and effectiveness – the “specialness” – of HQHVS surgical skills, so their altruism takes the form of volunteering these skills to areas in need. The opportunity for tourism and the ability to experience the host communities were other reasons contributing to their decision to go, as was the chance to combine vacation with meaningful service to the community. A side benefit, though not usually a primary motivation, of spaycation participation was camaraderie with other HQHVS professionals that resulted in friendships, connections and technical learning.

While the traits and emotions that drive HQHVS vets to participate are admirable, these motivations do not necessarily support or inspire critical scrutiny of spaycation trips, thus leaving a potential gap between the participants’ cognitive and emotional motivations and the spaycation’s actual impacts.

For the second research question of whether spaycations are a “good” thing, the answers are nuanced. The question itself is purposefully broad, as the characteristics of “goodness” in this context depend on the participants’ responses that reflect their observations and judgments. Each of the themes in this study highlight potential pitfalls of spaycations including the pressures placed on volunteers, the high cost of spaycations, the questionable or un-evaluated efficacy of spaycation clinics and the potential for colonialism and “savior” attitudes.

Ethical Community Engagement

The recently published “Principles of Veterinary Community Engagement”²⁰ describes ethical engagement practices for programs working with marginalized, underserved or underrepresented communities and is based on ethical practices in human health engagement programs. While the document was written with domestic (USA) programs in mind, the principles and pitfalls it describes can be used as a framework for designing and critiquing spaycation programs as well. Central to the document is the premise that our field has an obligation to follow evidence-based ethical engagement practices.

Stop, Collaborate and Listen

Collaboration with community residents and local animal caretakers is an essential part of all the phases of the community engagement process, beginning with a needs assessment and continuing throughout project design, participation and ongoing assessment and improvement.²⁰ The authors recommend that “collaborators should take time to establish the definition of a ‘successful program’ in the eyes of all interested parties, recognizing priorities may differ” (page 12).²⁰ The document goes on to say that long-term collaborative programs that are sustainable in the community are most effective at solving systemic issues of veterinary care access.

This degree of community involvement and self-determination did not appear typical among the spaycations that participants described in the current study. Respondents agreed that supporting and developing local infrastructure for long-term sustainability is important, and varied in their assessment of the degree to which the programs they had participated in or were aware of meaningfully involved the local community and would have a sustainable impact. Many described limited interactions with locals on their spaycations and saw little chance for mentoring of local veterinary professionals

or aspiring veterinary professionals. Few programs appeared to develop sustainable local resources for animals or veterinary care, and some participants recognized the potential for spaycations to create a dependency on outside resources rather than developing those resources within their community. On the other hand, a few participants described participating in programs that were developed and carried out in long-term collaboration with the host community and whose priorities were shaped by the community's self-defined needs. Others described the evolution of their spaycation program into a community-run and community-staffed sustainable endeavor that no longer required the presence of a visiting spaycation team.

Volunteers in Veterinary Community Engagement

The document²⁰ also offers guidance regarding the use of volunteers in veterinary community engagement programs. The authors recognized the potential for burnout and stress among professionals who are asked to volunteer. This concern was reflected by some of the current study's participants who felt there was an expectation to volunteer and give up vacation time to perform HQHVSN on spaycation, and that this expectation may contribute to burnout and other negative mental health impacts in veterinarians. Others countered this observation that in their own experience, volunteering on spaycation was inspiring and gave them professional purpose. Overall, in the case of spaycations, it appears that the programs are appealing enough for a large enough number of veterinary professionals that there are ample veterinarians willing to volunteer for these programs.

The authors²⁰ also warn about the potential for cultural privilege to be enacted through the use of volunteers: "To volunteer is to assume a position of privilege... A traditional philanthropy approach relies on people of privilege to accomplish the work through their 'acts of kindness'. This approach risks being culturally insensitive and inequitable and fails to examine the systemic issues creating the underlying inequities that community engagement should be addressing" (page 17).²⁰ This potential for insensitivity and "savior" attitudes can be mitigated by pre-program orientation and cultural sensitivity training as well as reflection and debriefing during and after program participation. The authors state that "there is an ethical necessity for reflective practice even when participating as a volunteer" (page 17).²⁰

In the current study, some respondents described cultural orientation and sensitivity training as a part of their spaycation, while others described no cultural training, and often had very little interaction with the local people or community. Post-clinic debriefing or ongoing discussion with volunteers about the spaycation program which would allow and encourage volunteer reflection

on experiences, observations and interactions was not described specifically by respondents and appears to be an uncommon practice. This missed opportunity for reflection, self-assessment, learning and improvement could enable spaycations to become more effective and ethical community interventions.

Another implication of the use of volunteers is that it excludes people without the financial means and time to volunteer.²⁰ In spaycations, this could affect both the potential volunteers (veterinarians, veterinary students, veterinary technicians) from high-income countries who would like to participate but cannot afford to do so, as well as people in the host community who already are or who aspire to become animal care or veterinary workers. As a consequence, people from lower income and BIPOC (Black, Indigenous and People of Color) communities are less likely to gain access to the opportunities, experience and rewards associated with program participation.²⁰

In the current study, the cost of spaycations to participants was a substantial impediment for some actual and would-be spaycation participants, and a few were specifically concerned about the barriers to access for low-income, BIPOC and local-community veterinarians, students and technicians. Spaycations are expensive, and the costs include distance travel, food, lodging, clinic venue and medical/surgical supplies, as well as the veterinary professionals' time and energy. Some respondents participated in spaycations that covered monetary costs for participants, a model that improved financial accessibility for volunteers but did not address lost wages or the logistical challenges created by their absence from home. A few participants suggested paying veterinarians wages for spaycations, or had actually participated in spaycations in a paid role. A model for "paid spaycations" has been used recently for staffing some domestic (USA) pop-up clinics.^{j,k} However, the paid spaycation model seems unlikely to become prevalent for international spaycations. The cost involved in fully funding spaycations worldwide would likely be prohibitive for many programs and would decrease the number of spaycation hosts or the frequency of spaycation events. Additionally, since spaycation host organizations appear to be able to find adequate numbers of volunteers using the current model, they are unlikely to deem it necessary to perform the extra fundraising (likely amounting to several thousand dollars per volunteer) required to offer paid spaycations. Because of the high costs, it is likely that the inequitable access to spaycation opportunities will persist, especially among groups with limited funding.

^j. <https://www.theemptyshelterproject.org/services> accessed 1/21/25

^k. <https://www.animalbalance.org/usa> accessed 1/21/25

Program Impact

The document²⁰ recommends beginning a community project with a needs assessment and defining “program success” as characterized by the various interested parties, and then by evaluating the program as it operates in order to adjust and improve the process. Participatory evaluation using multiple research modalities (quantitative, qualitative and mixed methods) is suggested to allow a holistic view of program impact including assessment of impact on animals, animal populations, communities and households.

In the current study, based on participants observations, clear definitions of program success and evaluation of program performance does not appear to be common practice among spaycations. Many study participants acknowledged the fact that they did not know how much effect spaycations have on local animal populations, and a few pointed out how rarely population modelling or targeting was used in planning or evaluation of spaycation clinics. Indeed, other than reporting total surgical numbers or total number of clinics, little has been published about the population impacts or safety of these clinics. Similarly, little has been published about the effects of these clinics on local people and communities. The exceptions are some university-based programs that include student training,³⁻⁷ as described in the Introduction.

The lack of evaluation and the unclear definition of “success” in themselves do not mean the spaycation clinics are not “good” or that they are ineffective, only that there is no data available to evaluate the benefits or harms. As the authors of the *Principles* state, “even well-intentioned programs can have negative impacts on individuals and communities” (page 11),²⁰ and without careful and reflective evaluation, those impacts may not be noted and their negative effects will not be addressed.

Effective and Ethical use of Funds

The high cost of spaycations, typically amounting to thousands of dollars per visiting veterinary professional including transportation, lodging, food, venue, equipment and supplies, brings up another ethical issue, which is whether the money spent on spaycations could or should be spent in a different way to provide greater benefit to the animals and humans in the clinic host community. It is difficult to know the full cost of spaycations, since the distributed nature of the expenditures between volunteers and host organizations conceals the total cost. Similar questions about cost-effectiveness and ethics have been raised about short-term human medical volunteer trips, with some authors concluding that the money spent on these trips is not as beneficial to host communities as the same amount spent on developing local services and infrastructure.^{8,10}

Several study participants recognized this potential cost-benefit gap and indicated that development of local training and infrastructure should be a part of all responsible spaycation projects. When spaycations include host community participation and local infrastructure development as well as training and mentorship opportunities for local professional and aspiring veterinary and animal care workers, the value of the money spent on spaycations is transferred more meaningfully and sustainably to the host communities. Even for programs serving remote communities with no potential for developing veterinary or animal care resources, program development in accordance with the *Principles of Veterinary Community Engagement*²⁰ should help shape the most effective, ethical and equitable results.

Conclusion: The Good Spaycation

For many study participants, spaycations are an opportunity for altruism that also enriches their work as veterinarians and as HQHVSN practitioners. Spaycations can provide camaraderie and connections within the HQHVSN community and allow learning and sharing of skills. All of these functions are worth perpetuating, embracing and protecting. Our challenge is to make these programs safe, equitable, ethical and sustainable so that the work we do is good for all parties.

Bauer,¹⁰ writing about human medical short-term voluntourism trips, suggests that “The onus of change lies (1) with the sending organizations irrespective of size or ideology, and (2) with the individual who wants to go overseas.” This advice applies equally well to spaycations. The compelling nature of these trips necessitates conscientious and culturally-sensitive leadership and planning to provide safe, sustainable, community-centered programs with a focus on long-term solutions. The organizations that fund, host or plan spaycations should critically examine their own practices to determine if they are providing high-quality, effective, sustainable, ethical and equitable care that is valuable to the communities they serve. To the extent that it is appropriate, they should engage with the *Principles of Veterinary Community Engagement*²⁰ and ensure the community’s meaningful participation in the project.

Veterinary professionals hoping to go on a spaycation have the responsibility to look into the spaycation program that they are seeking to join. Programs with a history and practice of community involvement and participation and a path to sustainability and local control are likely to be the most effective and ethical. As veterinary professionals, we can and should ask this of the programs in which we participate.

Navigating these various pitfalls may be difficult, but successful navigation appears possible and the potential exists for spaycations to be respectful and meaningfully

helpful to the host communities and a positive experience for the volunteer participants.

Acknowledgments

I would like to acknowledge all the veterinarians who voluntarily participated in this research. Without your thoughtfulness and candor, this research would not have been possible. Thank you also to Terry Spencer DVM, MEd, for critiquing an early version of the survey.

Conflict of interest and funding

The author declares no conflict of interest. No funding was received for this research.

Author notes

An earlier version of this research was presented as a research abstract at the 2024 American Board of Veterinary Practitioners conference and has been published in abstract format in the *Journal of Shelter Medicine and Community Animal Health*.²¹

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