

## **CONSULTATION ON INTERNATIONAL TRAVEL AND HEALTH (ITH)**

Singapore

**Wednesday, 2 May 2012**

### **I. Introduction**

The ITH consultation was organized with the support of the International Society of Travel Medicine (ISTM), prior to the 9th Asia Pacific Travel health conference in Singapore. The overall objective of the consultation was to reinforce regional and global health security by promoting the development of travel health information sharing in the Asia Pacific region.

The specific objectives of the consultation were:

- (i) to update participants on the current WHO and Asian Pacific work in travel health
- (ii) to promote networking between travel health experts in Asia Pacific and globally and
- (iii) to identify short, medium and longer term needs, priorities and strategies for the strengthening of travel health in Asia Pacific.

The expected outcomes of the consultation were the identification of short, medium and longer term needs, priorities, strategies and activities in travel health for the Asia Pacific region.

### **II. Summary of Discussions**

#### **Regional characteristics**

The Asia Pacific region has several billion inhabitants and is culturally and environmentally diverse. There is a large disparity of income in the region and many countries are experiencing rapid economic growth. Travel —internationally, regionally or within selected countries (e.g. India, China or Indonesia) —is increasing rapidly.

Forecasts indicate that passenger numbers in Asia Pacific are expected to almost triple from 779.6 million in 2010 to over 2.2 billion in 2030. Outbound Asian travel is booming with currently 18% of world's outbound travel. A 5% annual growth of international tourist arrival in Asia Pacific is observed, boosted by economic growth, increased income and leisure time, breakdown of political barriers, easing of travel restrictions, host countries recognizing benefits and simpler processes for visas, passports and foreign exchange. Over 24 million jobs and \$470 billion in GDP in the Asia-Pacific region are supported by aviation.

With diverse travel populations such as migrant workers, students, tourist, business, immigrants or emigrants, it is worthwhile to consider designing travel health programmes targeting broader mobile populations. Services also need to be designed for seniors, who represent an increasing share of tourist travel.

The importance of travel health and the potential economic impact of public health events for this region were highlighted during the 2003 SARS pandemic. There is strong regional concern about the introduction of new communicable diseases with epidemic potential in areas where vectors of transmission exist (such as yellow fever).

While some countries in the region such as Australia, China and Singapore already have a well-developed travel and health clinics networks lack of availability of vaccines or medications (such as malarone) in some countries is a concern and training in travel medicine needs to be expanded.

## ***Conclusions and Recommendations***

*Consultation on International Travel and Health (ITH), Singapore, 2 May 2012*

Also, one current impediment to the implementation of travel and health programmes is reduced budgets for quarantine services and insufficient training of immigration officers.

Finally, while travellers now have easy Internet access to information on travel and health, much of this information is non-standardized and non-validated. A large majority of Asia Pacific travellers don't seek any travel advice.

### **III. Conclusions and Recommendations**

The meeting concluded that the WHO consultation was very useful in highlighting key issues and informing strategic discussions in the region and it would be important to continue the process, regularly updating and sharing experiences, achievements and lessons learnt in implementation of ITH strategies. Three recommendations were made to bolster travel medicine in the Asia Pacific region:

#### **1. Expand partnerships and number of professionals involved in travel medicine**

- Identify and map experts and potential partners for travel health, including general practitioners and nurses within each country
- Involve country specific leverage such as departments within ministries of health in charge or professional medical and nursing bodies (some countries in the region already have national travel medicine associations)
- Identify WHO collaborating centers on travel (WHO should support development of national and/or regional bodies on travel health)
- Develop an Asia Pacific travel health network
- Develop surveillance capacity for illness during travel, STI, HIV and TB, safety, issues surrounding security and sex tourism, and laboratory capacity for rare infections

#### **2. Expand training in travel medicine**

- Complete country-specific and regional inventories of training resources (such as courses, workshops, printed materials, online training) and utilize existing regional training centers
- Standardize training materials with the support of the International Society of Travel Medicine (ISTM) and WHO (body of knowledge of ISTM could be a starting point)
- Identify country specific experts to be trained in travel medicine

#### **3. Promote information on, and awareness of, travel medicine**

- Promote travel medicine as a discipline
- Raise awareness of travel health issues among governments, health practitioners and general public ((by professional groups)
- Develop excellence in travel medicine information with support of international (WHO), national ( e.g. US CDC) or supranational resources (e.g. ECDC)
- Emphasize prevention, education, vaccination, and public health principles (e.g. vector avoidance) through regional information programmes and leave specifics to country
- Develop evidence-based information programmes for Asia by studying its disease patterns
- Expand into new applications such as smartphones
- Develop national websites on travel health
- Consider eventually proposing a WHO world travel health day

### **III. Annexes:**

1. Agenda
2. List of Participants

## **Conclusions and Recommendations**

Consultation on International Travel and Health (ITH), Singapore, 2 May 2012



# **World Health Organization**

Consultation on International Travel and Health (ITH)  
2 May 2012  
Lyrebird Room, Grand Copthorne Hotel, Singapore

## **AGENDA**

<b>10:00-10:30</b>	<b><u>Introduction of participants, objectives</u></b>	Gilles Pומרول  <b>Facilitator</b> <b>Fiona Genasi</b>
<b>10:30-11:00</b>	<b><u>WHO and Travel Health:</u></b> Presentation	Gilles Pומרول
<b>11:00-13:00</b>	<b><u>Trends in Travel an Travel Health:</u></b>  Global and Asia Pacific trends.  Trends in selected Asian countries Travel and Health Singapore Travel and Health China Travel and Health India Discussion	Annelies Wilder Smith  Lim Poh Lian Jin Xia Santanu Chatterjee
<b>13:00-14:00</b>	<b>Lunch Break</b>	
<b>14:00-15:30</b>	<b><u>Needs and priorities of travel health in Asia Pacific</u></b>  Working group	<b>Facilitator</b> <b>Stella Chungong</b>  3 groups facilitators and rapporteurs
<b>15:30-16:00</b>	<b>Coffee</b>	
<b>16:00-17:00</b>	<b><u>Needs and priorities of travel health in Asia Pacific</u></b> <b><u>(ctd)- Recommendations / conclusions</u></b>  Group reports Discuss and agree recommendations and next steps	



**National Centres**

**6. CDC**

**Gary Brunette**

Chief, Travelers' Health Branch  
Division of Global Migration and Quarantine  
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**7. NaTHNaC**

**Vanessa Field**

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**China**

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**8.**

**Zhang Jiwen**

Director-General

**9.**

**Jin Xia**

Chief  
Division of disease surveillance

**10.**

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**Lin Jian Wei**

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**11.**

**Liu Zhihyong**

Director of Liaison Department

**12.**

**Jian Yin**

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## ***Conclusions and Recommendations***

*Consultation on International Travel and Health (ITH), Singapore, 2 May 2012*

### **Private sector**

**13. Shoreland**

**Donald C. Cook**

President, Shoreland, Inc.  
Senior Director  
Publications and Corporate Relations  
Shoreland, Inc.  
United States of America

**14. Tropimed /  
Safe travel**

**Louis Loutan**

Hôpital Cantonal Universitaire  
Unité de Médecine des Voyages et des Migrations  
Genève Switzerland

### **Experts**

**15.**

**Annelies Wilder- Smith**

Director of Teaching, Institute of Public Health  
University of Heidelberg, Germany  
President of the Asia Pacific Society of Travel Medicine  
Previously: Director, Travellers Health and Screening Clinic, National  
University Hospital of Singapore

**16.**

**David R Hill**

Former Director of NaTHNaC (London , UK)  
Professor of Medical Sciences  
Director of Global Public Health Frank H. Netter MD  
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**17.**

**Marc Shaw**

Professor, Public Health, Tropical Medicine  
James Cook University, Auckland  
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**18.**

**Karin Leder**

Royal Melbourne Hospital  
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Melbourne  
Australia

## **Conclusions and Recommendations**

*Consultation on International Travel and Health (ITH), Singapore, 2 May 2012*

19. **John Simon**  
Honorary Professor University of Hong Kong  
Honorary Consultant Tropical Medicine  
Regional Medical Director for DuPont Asia Pacific  
Chairman Scientific Committee Vector Borne Disease  
HK Government  
Hong Kong
  
20. **Levina S. Pakasi**  
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22. **Kazunobu Ouchi**  
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OkayamaJapan
  
23. **Tadashi Shinozuka**  
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Japanese Society of Travel Medicine  
Tokyo  
Japan
  
24. **Lim Poh Lian**  
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Communicable Disease Centre, and Head, Travel and Health Clinic  
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25. **Goh Kee Tai**  
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Ministry of Health  
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26. **Santanu Chatterjee**  
Consultation Physician (Travel and Tropical Medicine )  
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India

**Conclusions and Recommendations**

*Consultation on International Travel and Health (ITH), Singapore, 2 May 2012*

27. **Anthony Gherardin**  
National Medical Advisor  
Travel Doctor - TMVC Group  
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**WHO HQ Geneva**

IHR Monitoring, Procedures and Information Unit (MPI)  
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Health Security and Environment Cluster (HSE)  
Geneva  
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28. **Stella Chungong**  
Coordinator

29. **Gilles Pומרول**  
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