The Destination Communities Support Interest Group of the ISTM: A Member Survey

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WHO ARE WE?
- Originally the Host Countries Committee formed in 1999
- Group reconfigured in 2011
- Renamed Destinations Communities Support Interest Group (DCSIG)
- Currently 385 group members

WHAT DO WE DO?
The focus of the Support Group is to look into specific issues pertaining to destination communities particularly in developing countries.

CURRENT PROJECTS
1) The Responsible Traveller documents which are traveller education tools developed by the DCSIG and available to all ISTM members as a member benefit.
2) Sex Tourism and its impact on the destination community
3) Medical Tourism may result in a number of medico-legal and ethical issues that impact not only on the returning patient developing complications, and on the medical infrastructure of both the country of origin and the destination country, but also on the population of the host country.

PURPOSE OF STUDY
The purpose of this study was to ascertain members’ views on those projects and also to understand their expectations for future activities to ensure that the DCSIG continues to achieve the Charter’s objectives.

METHOD
In June 2011 a questionnaire was distributed electronically to the then 339 DCSIG members and was completed on-line. The link was available for ten days. Two reminders were sent within the ten day period.

This questionnaire was divided into four sections: (1) The Responsible Traveller documents, (2) Medical Tourism, (3) Sex Tourism, and (4) Future Topics/Areas of Interest. Each section had a subset of four questions. The sixteen questions took no longer than ten minutes to complete. There were 63 respondents (20%).

RESULTS

The Responsible Traveller Document and Bookmark
44 (64.7%) of the respondents were aware of these documents, 59 (88.1%) were interested in distributing them and 64 (95.5%) expected them to be free of charge. All respondents agreed that the documents should be downloadable from the ISTM website. The preferred language of those documents is indicated in the Pie Chart at right.

Medical Tourism
According to 47 (74.6%) respondents, the DCSIG needs to address Medical Tourism.

Reasons Why Medical Tourism Should be Addressed
- Medical Tourism is increasingly popular and will continue to expand
- The impact it has on local structures and communities
- The need to counsel and educate patients prior to travel
- To address complications and post-travel/treatment issues

While 40 (62.5%) participants had no experiences with medical tourism, 24 (37.5%) had treated patients from other countries, treated post travel complications, knew of patients travelling for lower cost health care, or treated military, airline crews and other business travellers.

Sex Tourism
58 (93.5%) were interested in receiving the document on Sex Tourism and 56 (88.9%) wanted a traveller handout for distribution to their patients. 49 (79%) members supported links between DCSIG and other organizations such as ECAPAT (End Child Prostitution and Trafficking).

Health Issues Importance and Support
“Health issues: School children and staff travelling are not in need of health issues. How important should the health issues be in travel destination countries?”

Relevance of Educational Sessions from Groups
“At ISTM conferences, how relevant would it be to include educational sessions from groups such as A) Alliance for Rabies Control, Roll Back Malaria Campaign, Water Aid?”

Future Topics / Areas of Interest
Topics for future talks and presentations are summarized below:
- Travel insurance
- Impact, negative and positive, of tourism on destination countries
- Mutual interaction of travelers and destination communities
- Stratifying risk: violence, accidents
- International adoption
- Changes tourism can generate in aboriginal populations
- Adventure travel
- Medical tourism
- Education programmes for doctors participating in global care
- Sex tourism
- Risk profiles of young people working at NGOs
- Infection control and prevention
- Involve other organizations dealing with responsible tourism
- Overuse of disposable water bottles, garbage build up
- Better education of travellers
- Assisting practitioners develop travel medicine centres, mentorship
- Analysis of volunteer tourism – good or bad?
- Ethics and best practice for doctors and health professionals assisting in developing countries

CONCLUSIONS
Although the responses rate was low, the study clearly indicated the relevance of the DCSIG and underlined its mandate as reflected in the group’s Charter. Not only are the current topics and projects much needed and welcomed by the members, the suggested further topics and areas of interest provide directions for the group to enhance the members’ skills as travel medicine practitioners.

The complete survey results are available at www.istm.org.

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