

Travel Tips

Travel Tips 2010 provided by

Operator CUL (trading as Charity Challenge)

It is your responsibility to make sure you have all the travel documents you need such as: passport, visa and travel insurance. If you do not have the right documentation you may be prevented from flying and may not be entitled to a refund or travel on a future flight.

You should have:

- Two photocopies of your passport
- Two photocopies of your relevant tourist visa stamps (if required for your destination country)
- Two photocopies of your Travel insurance policy
- Two photocopies of your Vaccination certificates (if required for your destination country)

One copy should be left at home with a friend or relative, in case you lose or damage the originals. The other copy should be kept with you on your person, and separate to the originals. Where possible, you should put the originals in a hotel safe, but should carry the photocopies with you for identification. If you need to take the originals with you on the expedition, you should keep them in a sealable plastic bag to protect them from getting damp.

Passport

Your passport must be valid for at least six months from the end of your expedition. If it isn't, you may be refused entry into the country you are visiting. If you need to renew your passport, please allow at least six weeks to do so, and try to avoid applying just before peak travel times such as summer, Easter and Christmas. Don't forget to enter your next of kin details into the back of your passport. For more info on applying for a passport and to request an application form please visit or logon to your local embassy.

Visa

You should obtain the necessary Tourist Visa prior to your trip. Apply for your Tourist Visa in plenty of time before departure to avoid a last-minute panic, but remember that some visas become valid from the time they are issued. Therefore, if you apply for a three-month visa six months before the expedition, it will have run out before you get there! For the very latest visa requirements, you should check with the relevant embassy

& ensure you are aware of their business hours & any international festivals that may result in the embassy being closed.

Insurance

It is a condition of booking that you are covered by suitable travel insurance whilst participating on the challenge. Such insurance needs to be in place before you are accepted as a participant on the challenge. Please read CUL Travel insurance section in this area of the site for details.

Flight tickets

You will be organising your own flights. Once you receive the tickets, please check that they match the flight schedule that you booked. Check that your name is correctly spelt (the name on your ticket must match the name as it appears in your passport), that the airports mentioned are correct and that the dates of travel are as you have been advised. If there is any discrepancy, please contact your travel agent.

Luggage tags

Please do not write your home address on your luggage tags UNTIL you are on your homeward journey. Otherwise, anyone coming into contact with the bags will know that you are away and that your home may be empty. Put your name and address INSIDE your bag also, just in case the luggage tags get pulled off or destroyed. Lost baggage should be handled by the airline at the airport where it has not arrived, make sure you fill in a PIR (Property Irregularity Report) available from the airport, to track your luggage and aid any subsequent insurance claims.

Expedition Health Advice

The purpose of these notes is to encourage you to prepare yourself well for your Charity Challenge expedition. The potential problems listed below make up an alarming list but you are most unlikely to encounter any of the problems if you start your journey well prepared and if you act sensibly throughout your expedition.

Pre-expedition

It is a good idea to have a dental check-up before you go, as, in many of the countries we travel to, facilities can be very expensive and may not be of the same standard you are used to.

Vaccinations

Charity Challenge provides guidelines on the vaccinations and malaria protection needed for all the countries we operate expeditions in; see the Fact File for each country. These however are broad outlines and you should consult your GP or travel health clinic at least

two months prior to departure, for further advice. Some vaccinations cannot be given at the same time and some take time to be effective. For example, immunisation against Hepatitis B, can take six months to give full protection. See your doctor even if you are going at short notice, as some protection may be better than none. Some immunisations are free under the NHS (UK residents).

If you need anti-malaria medication, your doctor will advise on which is most appropriate. Some anti-malaria tablets are available from pharmacists without a prescription.

Diseases you may need vaccinations for:

- Diphtheria - a close contact disease generally spread through inhalation. Combined with tetanus vaccine.
- Hepatitis A - predominantly a disease of poor sanitation. Spread through food and water.
- Hepatitis B - spread through blood-to-blood contact, or often through sex. Strongly advised for any "high risk" traveller, even for short periods.
- Malaria - transmitted by the bite of infected mosquitoes. Different areas have different types of malaria so different drugs are recommended for prevention. Seek specialist advice.
- Meningitis - generally a disease contracted through close contact with locals, usually spread through airborne particles.
- Polio - spread through contaminated food and water. Potentially fatal in adults.
- Rabies - transmitted by bite, scratch or lick of infected animal. Requires immediate hospital attention.
- Tetanus - spread through bacteria that live in soil throughout the world, it is transmitted by contamination of deep wounds.
- Typhoid - a disease of poor sanitation spread through food and water.
- Yellow Fever - transmitted by infected mosquito bites. Countries that may not have the disease but have the mosquitoes that transmit the disease may need proof by certificate of vaccination that you will not carry the disease into their country.

Medical kits

Charity Challenge provides comprehensive medical kits to our staff on all of the expeditions, however we also recommend you taking your own. Pack your medical kit in

your main luggage except any medication you may need during your journey. For UK trekkers Nomad Travel Store & Clinics supplies medical kits designed for expeditions. For further information, please contact them on 020 8889 7014 or click on www.nomadtravel.co.uk. Emergency medical travel kits should carry sufficient identification to ensure their acceptance by Customs Officials but the contents should not be opened until needed. It is also unwise to carry loose syringes or needles unless you have a doctor's letter explaining their purpose, for example, if you are a diabetic. For more information contact:

- GP or a travel health clinic
- Nomad Travel Stores Health Information Line: 0906 8633414 (calls cost 60p per minute) office hours only
- Hospital for Tropical Diseases Travel Clinic Healthline on 09061 337733. (Calls charged at 50p a minute at all times)
- Malaria Healthline on 09065 508908 (Calls charged at £1 a minute at all times)
- MASTA – Medical Advisory Service for Travellers Abroad – 24-Hour Travellers' Health Line on 09068 224100.

If you want to take any sort of medicine with you – either prescribed or bought from a pharmacist – find out if there are any restrictions on taking it in and out of the UK or the country you are visiting. Ask the relevant Embassy or High Commission or the Home Office Drugs Branch (Tel: 020 7035 0472). Always carry medicines in a correctly labelled container, as issued by the pharmacist. Otherwise take a letter from your doctor or a personal health record card giving details of the drug prescribed in case you need it to get you through Customs. Remember, some medicines available over the counter in the UK may be controlled in other countries, and vice versa. Keep a written record on your person of any medical condition affecting you, such as angina pectoris, diabetes and haemophilia, and the proper names – not just the trade names – of any medication you are taking.

Expedition Health

Deep vein thrombosis

Sitting still for long periods in the inevitably cramped positions of an aircraft frequently leads to swollen ankles and sometimes muscle cramps in the legs can occur, but this is not unique to air travel and can occur whenever people are immobile for prolonged periods. Try not to sit down for too long. Rotate your ankles at regular intervals to help avoid swelling. Wear loose fitting, clothing and have something warm to wear, as the air-conditioning on the plane can be very cold. When it is convenient, get out of your seat and move around the cabin, to avoid travellers' thrombosis. Those with risk factors such as a history of deep vein thrombosis, hormone treatment, presence of malignancy, recent

leg surgery, or any major surgery, should discuss additional protective measures with their doctor. If you are concerned in any way about DVT, please consult your GP. Whilst on the flight, if you have a headache it is probably due to dehydration, so drink plenty of non-alcoholic fluids.

Set your watch

Set your watch to your destination time as soon as possible before take-off and mentally try to do the things at the right time. On arrival, try your hardest to fit in with the new time and resist the temptation of going to sleep too early or getting up too early.

Other in-flight advice

It is recommended for women to take sanitary protection with them. Even if you think you shouldn't need it, it is a good idea to have something just in case, as long-haul flights can often confuse the menstrual cycle. Also pack any regularly used medication in your hand luggage as you may need it during your journey or if your luggage is delayed.

Culture shock

A major element to culture shock lies in becoming familiar and to some extent taking part in the local way of life rather than trying to maintain your usual lifestyle and expectations. Keep reminding yourself that people and ways are different everywhere in the world. If you feel strongly enough about negative things that you see try not to interfere there and then, but on return get involved in charities that are positively active. Use relaxation breathing (with your eyes shut) to overpower panicky feelings - this is particularly useful on very overcrowded buses, trains, etc.

Diarrhoea (food & drink/water)

Travellers' diarrhoea is very common, especially in hot countries. Diarrhoea, as well as diseases such as cholera, typhoid and hepatitis, can all be caught from contaminated food and water, wherever you are in the world, be careful what you eat and drink. All of these diseases can be avoided by taking simple precautions:

- Always wash your hands thoroughly after going to the lavatory, before handling food and before eating.
- Carry wet wipes with you for cleaning your hands before eating or wipe your hands with Steridex (no water anti bacterial soap).
- Clean water plays a big part in staying healthy while travelling (that includes the water in swimming pools, lakes, rivers and the sea, so try not to swallow water when you are bathing or swimming). If you have any doubts about the water available for drinking, washing food or cleaning teeth; use bottled water, sterilise it with disinfectant tablets or boil it.

- When buying bottled water, check that the seal is unbroken, the sell-by date, and that there are no algae growing inside the bottle.
- You can buy water purification tablets from most chemists and they are easy to use, although make the water taste a little chlorinated.
- Avoid ice unless you are sure it is made from treated and chlorinated water. This includes ice used to keep food cool as well as ice in drinks.
- It is usually safe to drink tea or coffee, wine, beer, carbonated water and soft drinks and packaged or bottled fruit juices.
- Eat freshly cooked food, and ensure it is piping hot, avoid food, which has been kept warm.
- Avoid uncooked food, unless you can peel or shell it yourself.
- Avoid food likely to have been exposed to flies.
- Avoid ice cream from kiosks or traders.
- Fish and shellfish can be suspect in some countries, so be careful.

Dehydration

Visitors to the tropics are prone to dehydration and heat related conditions. This is particularly so in the first few days of travel, and more so if the traveller is exerting him/herself, e.g. trekking. It takes our bodies at least 7-10 days to adjust to the heat. In this time, we sweat more than we should and lose a lot of salt. Drink at least 3–4 litres of water per day to limit the effects of dehydration. This does not include tea, coffee or alcoholic beverages, which can contribute to dehydration (your urine should be light in colour, if it is dark you are not drinking enough).

Although we provide clean drinking water during your expedition, you may want to bring extra purification methods. We strongly recommend the Aqua Pure Traveller Water Purification System. An easy-to-carry, convenient bottle, it ensures you have safe, pure water wherever you go. The outer iodine sleeve kills all waterborne viruses and bacteria, such as Ecoli, Typhoid, Cholera, Hepatitis A and Polio. Officially endorsed by the Hospital for Tropical Diseases, the Aqua Pure Traveller is a partner of the Foreign and Commonwealth Office's Know Before You Go campaign (advice for British nationals on safe overseas travel). For more information, please contact Aqua Pure on 08705 820 000 and mention Charity Challenge.

Add extra salt to your food in this period, about two extra teaspoons of salt per person per day. Use electrolyte solutions if you are dehydrated. Trekking uses up a lot of energy and fluid and you will be sweating even in cold environments. Even if you are not in the sun

or heat, it is still very easy to dehydrate to a dangerous level. As for tropical conditions, keep drinking, drinking, drinking. Avoid exhaustion, which very easily leads to carelessness, lack of concentration and accidents.

Sunburn / sun damage

Sunburn is a major cause of distress to travellers and can have long-term effects, including skin cancer and premature skin ageing. Sunburn is more likely when the light is also 'reflected' from water (swimming pools or the sea), white sand or snow. Sunscreens absorb ultraviolet B (UVB) and to a lesser extent ultraviolet A (UVA). The Sun Protection Factor (SPF) refers to the protection against UVB. (e.g. 'SPF 8' allows approximately 8 times longer sun exposure without burning than with no protection). Wear a hat in the sun. Use 25+ sun protection cream. Cover up in lightweight cotton clothing. We also recommend you wear 100% ultra violet glasses.

Sore feet, cuts and grazes

Any soreness of the feet should be treated immediately with 'second skins' or other dressings. Treating sores early will help avoid crippling problems developing later & feeling uncomfortable throughout the expedition. It is better to hold up the group for a few moments to apply an initial dressing rather than to handicap the expedition with serious lameness caused by untreated sores, they will thank you for it in the long run!

Treat even small wounds and scratches promptly & let your tour leader know of any serious wounds or cuts. Abrasions in the tropics are most likely to become infected. Clean the wound and dress it. Change the dressing regularly. Take a simple, purpose-built medical kit & if you don't have the relevant first aid items necessary, please use the Charity Challenge kit.

Animal bites

Animal bites can start infections, which can be serious and sometimes fatal. Be wary of even apparently tame animals as rabies occurs in Europe and North America as well as in less developed countries. You can contract the disease if an infected animal bites you, so be careful not to touch any animal, whether it is wild, stray or tame. If you are bitten, post exposure treatment – if given early enough – usually prevents the disease developing. You can get the rabies vaccine before you leave, but it is only necessary for those who are undertaking long journeys in remote areas where medical treatment may not be immediately available. (Please see our list on recommended vaccinations for your destination in the Fact File.)

Insect borne diseases

Biting insects spread a wide range of tropical diseases; the most dangerous to the traveller is malaria. If possible, avoid mosquito bites as they carry any number of infections and can be very irritating. There are various anti-bug sprays available. Try to get one, which

contains DEET (Diethyltoluamide). At dusk and in wet weather, keep your arms and legs covered as that is prime time for mosquitoes. If you need anti-malaria medication for your expedition, your doctor will advise you on which is most appropriate, or refer to our notes on Vaccinations & Health in the Fact File for your chosen expedition. When you return home, if you are feeling particularly unwell it may be worth going to your GP to ensure you have not picked up an infection or parasite, which can cause symptoms such as anaemia and lack of energy. Remember that it may be a while before you readjust to a faster pace of life.

Diabetics

If you are a diabetic, it is a good idea to take some food with you on your flight in case there is a problem with the meal you ordered, or there is a delay in the meal service. If your diabetes is treated with insulin or sulphonylurea tablets, physical activity increases the risk of hypoglycaemia. Ask your doctor or diabetes nurse about adjusting your diet and medication to help prevent hypos when exercising on expedition. It is also important to discover how activity affects your diabetes control. In general terms, activity will bring blood glucose levels down because your muscles are using up extra glucose for energy. People who treat their diabetes with insulin or sulphonylurea tablets need to be prepared by carrying hypo treatments such as glucose tablets or sweet drinks. Regular blood glucose testing before, during and after activity will help you to discover how a particular activity affects you, so that you can adjust your routine, including your eating habits and/or your diabetes tablets or insulin as necessary. As everyone is different, this will involve a certain amount of trial and error but your diabetes team will be able to advise you. These notes were provided by Diabetes UK.