

Guatemala Country & Cultural Information

Guatemala is a developing country with an estimated population of over fourteen million. Its developing economy is characterized by wide income disparities, and is among the 10 poorest countries in Latin America. The distribution of income is severely uneven, as more than half of the population falls below the national poverty line and is stated to be living in extreme poverty.¹ This stark contrast is shown with modern, American-looking developments in one part of a city and tin shacks on the opposite side. Violent crime is a serious concern due to widespread poverty, an abundance of weapons, and a legacy of societal violence. Due to extreme poverty and widespread crime, orphan rates in Guatemala have increased, and great numbers of children are without hope for a better future. UNICEF estimates that over 370,000 orphans reside in Guatemala. Many of these children come from families who face extreme poverty.

Our approach in Guatemala is to partner with existing locations that are helping children. This may be an orphanage, school, or drop-in center. The directors of these locations are passionate and motivated to serve children holistically, but many times are not able to meet the needs of each individual child due to the poverty stricken economy and lack of government funding. The foundation of our work in Guatemala is through HopeChest's sponsorship program which will help with the children's medical, physical, educational, emotional, and spiritual needs. We have a Guatemalan staff of local believers who mentor and build relationships with the children.

Geography & Weather

Geography

• Guatemala is the third-largest country in Central America and is about the size of Tennessee. It is bordered by Mexico, Belize, Honduras, and El Salvador. Guatemala is a country of great diversity in its geography and climate with elevations from sea level to about 13,850 ft. Large parts of Guatemala are very mountainous, and climate depends much more on altitude than on latitude. While there are in fact areas with a tropical climate, there are others where nighttime temperatures can drop below freezing. As elevation increases, temperature decreases. The highest of elevations are found at the top of volcanic peaks, some of which are currently active volcanoes. Guatemala can be divided into three climate zones that have very distinct characteristics: the tropical climate zone, temperate zone, and cool zone.

Climate

- The temperate zone extends from approximately 3,300ft to 6,600ft above sea level. Daytime temperatures rarely exceed 85° F, and nights are pleasantly cool. Guatemala City as well as many of Guatemala's most popular tourist destinations like, Antigua Guatemala, Lake Atitlan, Coban are in the temperate zone.
- There are two seasons (rainy and dry). The rainy season from May to October is a mix of sunshine and clouds. There are periodic short tropical downpours in the late afternoons, clearing for the evening. The dry season, November to April has cooler temperatures. The coolest months are December and January, with occasional snowfall and frosts at high altitudes.

¹ CIA World Fact Book, 2009.

Nature

• The country manifests seven terrestrial eco-regions. Along the border with Mexico lies the Chiapas Depression dry forests. The Central American dry forests and Central American mountain forests run through Guatemala. A patch of the Belizean pine forests eco-region is located in northeast Guatemala. The Petén is covered with tropical rainforest and patches of grassy savanna. Deforestation in the Petén is a current environmental concern.. On the Pacific coastal plain, the landscape largely has been cleared of its tropical forest and savanna as migrant farmers search out cropland. Guatemala has 252 listed wetlands, including 5 lakes, 61 lagoons, 100 rivers, and 4 swamps.

People, Culture, & Religion

People & Language

- Approximately 59.4% of the population is Ladino (mixed Amerindian and Spanish) or white. Amerindian populations include: the K'iche' (9.1%), Kaqchikel (8.4%), Mam (7.9%) and Q'eqchi (6.3%). 8.6% of the population is "other Mayan," and 0.2% is indigenous non-Mayan and other (0.1%). (2001 census, CIA World Factbook)
- Spanish is spoken by 93% of the population as a first and second language. However, Spanish is not universally spoken among the indigenous population, nor is it often spoken as a second language by the elderly indigenous. Twenty-one Mayan languages, as well two non-Mayan Amerindian dialects are spoken in rural areas

Religion

• In Guatemala, 50–60% of the population is Catholic, 40% Protestant, and 1% follow the indigenous Mayan faith.

Currency & Money:

- Local currency is the quetzal. The quetzal is divided into 100 centavos. It is named after the national bird of Guatemala, the Quetzal whose feathers were once used by the ancient Mayans as currency. Coins currently come in the same denominations as US cents, with 1, 5, 10, 25, and 50 centavos coins and a 1 quetzal coin. Bills come in the same denominations as US dollars.
- If you are doing any souvenir shopping, please bring cash. In the bigger cities, some places will take major credit cards and US dollars. However, it's best to have both US dollars and local currency when traveling and making purchases where US dollars are not accepted. You will also be more likely to be charged a fair rate if paying with local currency. Our field staff will help you exchange money upon arrival. Do NOT exchange money at the airport as you will receive a high exchange rate.
- Notify your bank/credit card company ahead of time of your international trip.

Government and Economy:

Guatemala is a presidential representative democratic republic, whereby the President of Guatemala is both head of state and head of government, and of a multi-party system. Executive power is exercised by the government. Legislative power is vested in both the government and the Congress of the Republic. Álvaro Colom is the President of Guatemala as of 14 January 2008.

Guatemala is the most populous of the Central American countries with a Gross Domestic Product (GDP) per capita roughly one-half that of Argentina, Brazil, and Chile. The agricultural sector accounts for about one-tenth of GDP, two-fifths of exports, and half of the labor force. Coffee, sugar, and bananas are the main products, with sugar exports benefiting from increased global demand for ethanol. The 1996 signing of peace accords, which

ended 36 years of civil war, removed a major obstacle to foreign investment, and Guatemala since then has pursued important reforms and macroeconomic stabilization.

The Central American Free Trade Agreement (CAFTA) entered into force in July 2006 and has since spurred increased investment in the export sector, but concerns over security, the lack of skilled workers and poor infrastructure continued to hamper foreign participation. A large flux of Guatemalans continues to pour into Belize, due to the superior condition of the Belizean economy and an overpopulated Guatemala.

Health and Statistics:

Data regarding the monitoring of the Millennium Development Goals (MDG) indicates that 21.5% of the population lives on less than \$1 per day (2005), largely in rural and indigenous areas. Approximately 49% of children under the age five suffer from chronic malnutrition (68% among indigenous children). Food insecurity has worsened in recent years, and pockets of populations with acute and severe malnutrition have reappeared.

Travel Information and Tips:

Passports & Visas

- IMPORTANT: Your passport must be valid for at least six months from the date you depart for Guatemala. The passport must also have a blank page for the stamp.
- We will provide you with copies of your passport, insurance card, and important travel documents. We highly recommend that you keep these, along with any other essential travel documents, with you at all times. We ask that these are kept separately than your passport, in case of loss or damage to the originals. It will make it easier to replace them if you have copies.
- **Visas:** Guatemala tourist visa is not required for US citizens for a stay up to 90 days.
- An exit tax must be paid when departing Guatemala by air. The exit tax (currently \$30) is generally included in an airline ticket price, but many are charged separately. There is an additional airport security fee (20 Quetzales, approximately \$2.50) that all travelers must pay at the airport.

Immunizations

It is highly recommended that your childhood vaccines (MMR, Diphtheria, Tetanus, DTP, and Polio) be up to date. Please consult your personal physician or local health department before getting other various vaccinations (Yellow Fever, Hepatitis A, Hepatitis B, Typhoid) or malaria medication. Refer to the following link to see the recommendations based on the Center for Disease Control and Prevention. Since most vaccines don't produce immunity until at least two weeks after they're given, visit a physician four to eight weeks before departure. http://wwwnc.cdc.gov/travel/destinations/guatemala.aspx

Food and Water

Do not drink tap water unless boiling it, having it filtered, or chemically disinfected. Do not drink un-bottled beverages or drinks with ice. Avoid unpasteurized milk and products. Be wary of any fruits or vegetables that have been washed in unboiled water. Use discretion in regards to all items that have not been thoroughly cooked.

Internet

Most guest houses offer internet access, and there are plenty of internet cafés for inexpensive fees throughout the city at your convenience. We will do our best to try and have you stay connected with your family back

home, but please remember that you may spend a fair amount of time traveling to your specific sites, as well as long amounts of time doing ministry with the kids!

Clothing

- <u>Women</u>: The general rule for skirts, dresses, and shorts is that they should reach the knees. Jeans and capris are acceptable. All shirts and blouses should have sleeves. Tank tops, spaghetti strap, and tight-fitting shirts should be avoided. For church, business casual attire is appropriate (skirt, dress, slacks, blouse).
- <u>Men</u>: T-shirts, collared shirts, shorts, slacks, and jeans are all acceptable. For church, wear slacks and a collared shirt.
- If visiting a city dump area or CarePoint, please do not wear shorts, skirts, or tank tops.
- If visiting Operation Rescue School, please do not wear a skirt.

Additional Advice:

- You and your group may be driving long distances each day (depending on where your team will be visiting). Travel by car/van in Guatemala can (and most likely) will look much different than traveling by auto in the US. If you have motion sickness, please bring medicine with you. We will have a hired driver and vehicle for your team throughout your time in country. You will also have staff members who speak the language to assist you as you travel.
- It is important to always remember that you are guests in their country. Please be respectful of their culture, and refrain from making any jokes or comments about their culture that could be taken offensively. It is absolutely vital that all members of the team are flexible and open to change, as even the most well-planned itinerary will change.
- We ask that you refrain from giving certain children individual gifts, while other children do not receive any gifts. We understand that this can be difficult, but it can lead to difficulties for the staff and lots of unnecessary hurt for the children (i.e. gifts are often stolen by other children, some children are left feeling rejected or abandoned yet again if they do not receive a gift, and occasionally children can feel isolated). If you have any questions, please contact your trip leader or Partner Relations Manager. We encourage teams to bring enough gifts for all children at the locations you will be visiting.



Guatemala Packing List

- □ Passport
- □ 2 Photo copies of passport kept in separate location
- □ Bible
- Journal
- □ Insurance Card (Sent to you by CHC)
- □ Green CHC luggage tags
- □ Comfortable walking shoes
- □ Flip flops or shower shoes
- □ T-shirts, modest tops (no spaghetti straps or clingy blouses)
- □ Sweatshirt, fleece, or jacket (dress in layers)
- □ Capris, jeans, slacks
- □ Skirts/Dresses at or below the knee (No skirts at Operation Rescue School)
- □ Church attire (slacks, collared shirt, dress, etc.)
- □ Umbrella/rain jacket (rainy season is from May to October)
- Toiletries
- □ Travel size toilet paper for those times where you might be without
- □ Towel and washcloth if your guest house does not provide this
- □ Snacks (All meals & bottled water will be provided for you. If you bring any comfort food from home, please eat it privately and not in front of any children or CarePoint staff).
- Personal First Aid Kit
- □ Prescription medication (pack in carry-on luggage)
- □ Over-the-counter medication (allergy, pain relievers, motion sickness, antacids, cold/flu, cortisone cream, antibiotic ointment, etc.)
- □ Insect repellent
- □ Camera and memory cards/film
- □ Any necessary chargers/adapter plugs (110v and mostly 2-prong U.S. outlets)
- □ Sunglasses
- □ Sunscreen
- □ Flashlight
- □ Alarm Clock
- Jewelry or other valuable items are not recommended to prevent theft
- □ Pack a couple of days of clothing and toiletries in your carry-on in case luggage is lost or delayed. Also, pack your prescription medication in your carry-on.
- **C**ash and ATM/credit card. Notify your credit card company ahead of time of your international trip.



The following information is taken from the CDC website with additional specific health related information in regards to traveling to Guatemala. Please visit http://wwwnc.cdc.gov/travel/destinations/guatemala.htm to get the information on the links below.

Malaria

Areas of Guatemala with Malaria: Rural areas only at altitudes <1,500 m (4,921 ft). None in Antigua, Guatemala City, or Lake Atitlán. (more information)

If you will be visiting an area of Guatemala with malaria, you will need to discuss with your doctor the best ways for you to avoid getting sick with malaria. Ways to prevent malaria include the following:

- Taking a prescription antimalarial drug
- Using insect repellent and wearing long pants and sleeves to prevent mosquito bites
- Sleeping in air-conditioned or well-screened rooms or using bednets

Primaquine is a good option for an antimalarial drug (only after G6PD testing) in Guatemala. Atovaquone-proguanil, chloroquine, doxycycline, or mefloquine can also be used instead. For detailed information about each of these drugs, see <u>Table 3-11</u>: <u>Drugs used in the prophylaxis of malaria</u>. For information that can help you and your doctor decide which of these drugs would be best for you, please see <u>Choosing a Drug to Prevent Malaria</u>.

To find out more information on malaria throughout the world, you can use the <u>interactive CDC</u> <u>malaria map</u>. You can search or browse countries, cities, and place names for more specific malaria risk information and the recommended prevention medicines for that area.

Malaria Contact for Health-Care Providers

For assistance with the diagnosis or management of suspected cases of malaria, call the CDC Malaria Hotline: 770-488-7788 or toll-free 1-855-856-4713 (M-F, 9 am-5 pm, Eastern time). For clinicians needing emergency consultation after hours, call 770-488-7100 and ask to speak with a CDC Malaria Branch clinician.

A Special Note about Antimalarial Drugs

You should purchase your antimalarial drugs before travel. Drugs purchased overseas may not be manufactured according to United States standards and may not be effective. They also may be dangerous, contain counterfeit medications or contaminants, or be combinations of drugs that are not safe to use.

Halofantrine (marketed as Halfan) is widely used overseas to treat malaria. CDC recommends that you do **NOT** use halofantrine because of serious heart-related side effects, including deaths. You should

avoid using antimalarial drugs that are not recommended **unless** you have been diagnosed with lifethreatening malaria and no other options are immediately available. For detailed information about these antimalarial drugs, see <u>Choosing a Drug to Prevent Malaria</u>.

More Information About Malaria

Malaria is always a serious disease and may be a deadly illness. Humans get malaria from the bite of a mosquito infected with the parasite. Prevent this serious disease by seeing your health-care provider for a prescription antimalarial drug and by protecting yourself against mosquito bites (<u>see below</u>). Travelers to malaria risk-areas in Guatemala, including infants, children, and former residents of Guatemala, should take one of the antimalarial drugs listed in the box above.

Symptoms

Malaria symptoms may include

- fever
- chills
- sweats
- headache
- body aches
- nausea and vomiting
- fatigue

Malaria symptoms will occur at least 7 to 9 days after being bitten by an infected mosquito. Fever in the first week of travel in a malaria-risk area is unlikely to be malaria; however, you should see a doctor right away if you develop a fever during your trip.

Malaria may cause anemia and jaundice. Malaria infections with *Plasmodium falciparum*, if not promptly treated, may cause kidney failure, coma, and death. Despite using the protective measures outlined above, travelers may still develop malaria up to a year after returning from a malarious area. You should see a doctor immediately if you develop a fever anytime during the year following your return and tell the physician of your travel.

Top of Page

Other Diseases Found in Mexico and Central America

Risk can vary between countries within this region and also within a country; the quality of in-country surveillance also varies.

The following are disease risks that might affect travelers; this is not a complete list of diseases that can be present. Environmental conditions may also change, and up to date information about risk by regions within a country may also not always be available.

<u>Dengue</u> epidemics have affected most countries in Central America in the past 5 years. <u>Filariasis,leishmaniasis</u>, <u>onchocerciasis (River blindness)</u>, and <u>American trypanosomiasis</u>

<u>(Chagas' disease)</u>are diseases carried by insects that also occur in this region, mostly in rural areas. Risk to the usual traveler is low. Myiasis (botfly) is endemic in Central America. Protecting yourself against insect bites (<u>see below</u>) will help to prevent these diseases.

<u>Gnathostomiasis (roundworms)</u> has increased in Mexico, with many cases being reported from the Acapulco area, infection has been reported in travelers. Humans become infected by eating undercooked fish or poultry, or reportedly by drinking contaminated water.

Foci of active transmission of <u>leishmaniasis</u> (predominantly cutaneous) are present in all countries in Central America. West Nile virus has been found in Mexico and may spread in Central America. <u>Diarrhea</u> in travelers is common and may be caused by bacteria, viruses, and parasites. Diarrhea caused by enterotoxigenic *E. coli* predominates, but other bacteria and protozoa (including *Giardia, Cryptosporidia*, and *Entamoeba histolytica*) can also cause diarrhea.

Cases of hantavirus pulmonary syndrome have been reported from Panama.

Outbreaks of <u>leptospirosis</u> have occurred in travelers to the area (including whitewater rafters in Costa Rica and U.S. troops training in Panama). Sporadic cases and outbreaks of<u>coccidioidomycosis</u> and <u>histoplasmosis</u> have occurred in travelers to Central America. Risky activities include disturbing soil and entering caves and abandoned mines. Cutaneous larva migrans occurs in visitors, especially those visiting beaches.



Personal Health Care for the Traveler - Part 1

Before the trip:

Pre-Existing Medical Conditions: It is important that travelers have the best advice and care in planning for a productive and pleasant trip. If you plan to travel and have a pre-existing medical condition, consult your doctor four to six weeks before departure. It is beneficial to have your blood type identified, in case you need an urgent blood transfusion during your trip. Patients with chronic illness should bring an adequate supply of medication for the trip.

Travelers First Aid Kit:

Some of the following items may prove useful during the trip:

- -Prescription Drugs
- -Anti-Diarrheal medication
- -Motion sickness medication
- -Sleeping pills
- -Eye drops
- -Antacids/Pepto Bismol
- -Pain Relievers (Tylenol, Motrin, Aspirin)
- -Cold Remedies
- -Antibiotic Ointment
- -Insect Repellant*
- -Calamine Lotion
- -Sunscreen
- -Cortisone Cream
- -Basic first aid items, such as band aids, scissors, gauze, tape, etc.

During the trip:

In order to maintain good health, be careful about the food and water you consume. Also, protect yourself against insect bites by applying repellant daily if you are visiting a country where mosquitoes can be a problem. Also, learn and follow the local automobile and traffic safety rules for pedestrians. Be prepared to alter travel plans en route. If you need medical care, you can usually find medical care either by asking the hotel information staff or calling your country's consulate for the names of recommended doctors. You will usually find English speaking doctors at university hospitals or major hospitals.

Traveler's Diarrhea

The most common cause of traveler's diarrhea, usually a self-limited illness of several days duration, is infection with bacterial organisms such as E. coli, shigella, salmonella, campylobacter and other bacteria. Viruses and parasites are less common causes of this disorder. Travelers to areas where hygiene is poor are advised to avoid uncooked foods, unwashed salads, unpeeled fruit, and unboiled tap water, including ice. Oral rehydration is the cornerstone of the treatment of diarrhea. This can be accomplished by drinking water, tea, broth or carbonated beverages. In severe cases, travelers may need commercial oral rehydration fluid or intravenous fluids. It is most important to drink enough fluids to replenish the body's loss of water, salt and sugar. Drink more than you think you lost. This compensates for loss of water through the skin or respiration. Commercial oral rehydration packets may be used to ensure more rapid absorption.

For watery diarrhea, taking Pepto Bismol every 30 minutes, up to 8 doses may have benefit. If diarrhea is sever, accompanied by blood, mucus, fever and severe cramps, or lasts more than three days, consult a doctor. Early treatment with Pepto is a reasonable alternative prophylaxis, but potential side effects such as a hypersensitivity reaction like skin rashes or hematologic reaction like agranulocytosis must be considered.

If diarrhea persists or recurs, consult your doctor and asked to be checked for possible parasites.

Water / Food-Born Diseases

These diseases include: typhoid fever, hepatitis, amebiasis, roundworms, tape-worms, Guinea worm and other parasites. Preventive measures include avoiding the following sources:

Contaminated water: For drinking safe water, use any of the following methods: Bottled water, portable water purifier, iodine drops, Halazon tablets (water purification tablets), or boil water for 10 minutes.

Avoid ice cubes, unless purified water was used.

Uncooked Vegetables and Fruit: Wash well in clean or chlorinated water. It is best if you peel fruits yourself after washing them.

Uncooked meat and poultry: Is safer to cook them well, to kill any germs such as salmonella or parasites such as tapeworm.

Creamy Desserts, Cheeses and Local Dairy Products: Make sure they are not spoiled.

HIV/AIDS

AIDS (Acquired Immune-Deficiency Syndrome) is a contagious disease caused by an organism called Human Immunodeficiency virus, or HIV for short. The disease destroys part of the body' ability to build immunity to illness. This leaves the body unable to defend itself against infections and certain kinds of cancers. HIV/AIDS knows no geographic, social, racial or cultural boundaries. However, you can protect yourself against this disease during your travels by knowing some simple rules. HIV/AIDS should NOT be feared or prevent travel to any part of the world.

HIV spreads more frequently through sexual activity. The virus can be transmitted from any infected person to his or her sexual partner. It is also spread by transfusion of infected blood, contaminated needles, or other skin-piercing and tattooing instruments. In addition, and HIV infected mother can transmit the virus to her child before, during or shortly after birth. A breast feeding HIV infected mother can transmit it through nursing her child.

It is NOT spread by the following:

-Casual contact with a person, such as shaking hands, hugging, or sharing the same space.

-It is not spread by insect bites or contact with animals.

-It is not spread by sharing swimming pools, bathrooms, telephones, dishes, hugging, coughing or sneezing. You cannot get HIV/AIDS by living with someone with the virus unless by sexual contact.

If you are injured or ill, avoid or postpose any blood transfusion, unless it is absolutely required. In many places, before blood is used for transfusion, it is tested for the HIV virus contamination. If you need blood, try to ensure that screened blood is used. Since more and more countries around the world are now testing blood for the HIV virus, blood transfusions will increasingly be protected from the virus contamination.



Personal Health Care for the Traveler – Part 2

In addition to safe guarding yourself during your trip, there are also some recommendations for travelers to consider being proactive about as it relates to travel vaccinations. Below we've listed the **Center for Disease Control's** recommendations for vaccines for each country, listed below alphabetically. *Please note that some of the countries we work in, do require certain vaccines and require proof of your shot record upon entry into their country.* Please see our further attachment with additional details from the C.D.C. about the specific country you will be visiting.

It is important to remember that many shots need advance planning. You should set up an appointment with your doctor or travel clinic at minimum 4 to 6 weeks before you trip. Most vaccines take time to become effective in your body and some vaccines must be given in a series over a period of days or sometimes weeks. If it is less than 4 weeks before you leave, you should still see your doctor. You might still benefit from shots or medications and other information about how to protect yourself from illness and injury while traveling.

information taken from www.cdc.gov (January 2015)

This chart below lists the most common/routine vaccines that are recommended for traveling to developing nations.

Vaccination or Disease	Recommendations or Requirements for Vaccine-Preventable Diseases
Routine	Recommended if you are not up-to-date with routine shots, such as measles/mumps/rubella (MMR) vaccine, diphtheria/pertussis/tetanus (DPT) vaccine, poliovirus vaccine, etc.
<u>Hepatitis A</u> or immune globulin (IG)	Recommended for all unvaccinated people traveling to or working in countries with an intermediate or high level of hepatitis A virus infection where exposure might occur through food or water. Cases of travel-related hepatitis A can also occur in travelers to developing countries with "standard" tourist itineraries, accommodations, and food consumption behaviors.
<u>Hepatitis B</u>	Recommended for all unvaccinated persons traveling to or working in countries with intermediate to high levels of endemic HBV transmission, especially those who might be exposed to blood or body fluids, have sexual contact with the local population, or be exposed through medical treatment (e.g., for an accident).

Vaccination or Disease	Recommendations or Requirements for Vaccine-Preventable Diseases
<u>Typhoid</u>	Recommended for all unvaccinated people traveling to or working in East Africa, especially if staying with friends or relatives or visiting smaller cities, villages, or rural areas where exposure might occur through food or water.
Polio	Recommended for adult travelers who have received a primary series with either inactivated poliovirus vaccine (IPV) or oral polio vaccine (OPV). They should receive another dose of IPV before departure. For adults, available data do not indicate the need for more than a single lifetime booster dose with IPV.
<u>Yellow Fever</u>	Requirements: Required if traveling from a country with risk of YFV transmission (this does not include the U.S.) and if 9 months of age or older. Recommendations: Recommended for all travelers ≥9 months of age, except as mentioned below. Generally not recommended for travelers whose itinerary is limited to the Afar and Somali Provinces. Vaccination should be given 10 days before travel and at 10-year intervals if there is on-going risk. <u>Find an authorized U.S. yellow fever vaccination clinic</u> .
<u>Meningococcal</u> (meningitis)	Recommended if you plan to visit countries that experience epidemics of meningococcal disease during December through June.
Rabies	Recommended for travelers spending a lot of time outdoors, especially in rural areas, involved in activities such as bicycling, camping, or hiking. Also recommended for travelers with significant occupational risks (such as veterinarians), for long-term travelers and expatriates living in areas with a significant risk of exposure, and for travelers involved in any activities that might bring them into direct contact with bats, carnivores, and other mammals. Children are considered at higher risk because they tend to play with animals, may receive more severe bites, or may not report bites.

ETHIOPIA

All of the above...In addition to the above recommendations, please see the following attachment regarding Malaria pills.

http://wwwnc.cdc.gov/travel/destinations/ethiopia.htm

GUATEMALA

Recommended routine vaccines as stated above under "routine", Hep A, Hep B, Typhoid and Rabies (if applicable). Please see the following attachment regarding malaria pills for Guatemala.

http://wwwnc.cdc.gov/travel/destinations/traveler/none/guatemala

HAITI

Recommended routine vaccines as stated above under "routine", Hep A, Hep B, Typhoid and Rabies (if applicable). Please see the following attachment regarding malaria pills for Haiti.

In addition to these, the CDC has this to say about Yellow Fever:

There is no risk of yellow fever in Haiti. The government of Haiti *requires* proof of yellow fever vaccination **only** if you are arriving from a country with risk of yellow fever. This does **not** include the US. If you are traveling from a country other than the US, check this list to see if you may be required to get the yellow fever vaccine: <u>Countries with risk of yellow fever virus (YFV) transmission</u>.

For more information on recommendations and requirements, see <u>yellow fever recommendations and requirements</u> for <u>Haiti</u>. Your doctor can help you decide if this vaccine is right for you based on your travel plans.

http://wwwnc.cdc.gov/travel/destinations/haiti.htm

INDIA

Recommended routine vaccines as stated above under "routine", Hep A, Hep B, Typhoid, Polio, Rabies and Japanese Encephalitis. Please see the following attachment regarding malaria pills for India.

In addition to these, the CDC has this to say about Yellow Fever:

Although yellow fever is not a disease risk in India, the government requires some travelers arriving from or transiting through <u>countries with risk of yellow fever virus transmission</u> to present proof of yellow fever vaccination. If you will be traveling to India from any country other than the United States or transiting through another country on your way from the United States, this requirement may affect you.

http://wwwnc.cdc.gov/travel/destinations/india.htm

MOLDOVA

Recommended routine vaccines as stated above under "routine", Hep A, Hep B, *Rabies.

http://wwwnc.cdc.gov/travel/destinations/moldova.htm

RUSSIA

Recommended routine vaccines as stated above under "routine", Hep A, Hep B, *Rabies.

http://wwwnc.cdc.gov/travel/destinations/russia.htm

SWAZILAND/SOUTH AFRICA

Recommended routine vaccines as stated above under "routine", Hep A, Hep B, Typhoid,*Rabies.

The CDC had this to say about Yellow Fever:

There is no risk of yellow fever in Swaziland. The government of Swaziland *requires* proof of yellow fever vaccination only if you are arriving from a country with risk of yellow fever. This does not include the US. If you are traveling from a country other than the US, check this list to see if you may be required to get the yellow fever vaccine: <u>Countries with risk of yellow fever virus (YFV) transmission</u>.

For more information on recommendations and requirements, see <u>yellow fever recommendations and</u> requirements for Swaziland. Your doctor can help you decide if this vaccine is right for you based on your travel plans.

(Updated January 2015)

Please see the additional attachment regarding Malaria medicine for Swaziland/South Africa.

http://wwwnc.cdc.gov/travel/destinations/swaziland.htm

http://wwwnc.cdc.gov/travel/destinations/traveler/none/south-africa

UGANDA

All of the above.

The CDC had this to say about Yellow Fever:

Health recommendation: Yellow fever is a risk in Uganda, so CDC recommends this vaccine for all travelers who are 9 months of age or older.

Country entry requirement: The government of Uganda also requires proof of yellow fever vaccination if you are traveling from a country with risk of yellow fever (this does not include the US - for complete list, see Countries with risk of yellow fever virus (YFV) transmission.)

Please see additional attachment for malaria pills for Uganda.

http://wwwnc.cdc.gov/travel/destinations/uganda.htm