Pre-departure Training?

Are we doing the best that we can to prepare young people for positive travel experiences?
In our experience, what are the standard elements of a pre-departure training program?
Common Elements

• Packing List
• Country Information
• Cultural Information that is regionally-specific
• Health Information on: Vaccinations, tropical diseases, hydration, sunburn and other environmental illnesses, what to bring in a first aid kit (include condoms)
• Culture Shock information
• Notes on combating homesickness
• Interpersonal games and exercises such as Myers-Briggs personality tests
MENTAL AND SEXUAL HEALTH RISKS?

- Depression was ranked as the world’s single leading cause of disability in 2001 by WHO
- Depression currently ranks as #4 on the world’s top 10 causes of the global disease burden (WHO, CCL, 2009)
- Unsafe sex is the second leading factor in death and disease in the developing world and is the 9th most common cause in the Global North (The Lancet, 2006)
- 15% of Canadian children experience serious mental health disorders and less than one fifth actually receive treatment (CCL, 2009)
- Over 45% of American youth aged 19 – 25 have had a psychiatric diagnosis (Jaschik, 08)
- Over 25% of youth in this age group have suffered from alcohol or drug related substance abuse
- It is estimated that 6% of all North American undergraduate students have seriously considered suicide
- Suicidal ideation is often linked to substance, physical and sexual abuse
ARE THESE RISKS ELEVATED ABROAD? WHY OR WHY NOT?

Mental and sexual health risks are present in the lives of youth both at home and when they are abroad.

However, the stress of travelling, losing support networks and family contact, adjusting to a new culture and adapting to a different physical climate can all serve to elevate risk during travel.

Changing time zones can also be a cause for psychotic break in patients with psychosis and mood disorders due to the stress it causes on the system.
WHY MUST IT BE OUR RESPONSIBILITY TO ADDRESS THESE RISKS?

Often, our goal of sending youth abroad is to help develop and shape their world view in a positive way... We aim to nurture them into becoming citizens of the world.

Exposing youth to increased risks for harm is counter to our goal of nurturing happy, healthy, globally-conscious communities.

Global Engagement is not an abstract ideal, it is a process that engages the whole individual and rests on their personal needs and health.
WHAT ARE THE BARRIERS TO REDUCING RISK?

- Violence against women is higher in some regions and access to support and criminal prosecution can be rare.
- Victims of sexual violence are often hesitant to disclose. If the incident happens in another country it is MUCH easier to hide or keep secret.
- Unequal power relationships between white travellers and locals can often blur the line between a mutual relationship and a commercial sex transaction and be confusing for young people.
- Consequences such as STI’s, pregnancy and emotional crisis are difficult to treat in isolated or rural areas.
SEXUALITY IN THE NORTH?
WHAT ARE OUR ORGANIZATIONAL BARRIERS?

- Social stigma and cultural notions of personal and private are a barrier to *addressing* the mental and sexual health risks faced by young travellers.
- Insurance and liability issues cause fear for the traveller and the potential employer.
- Youth are afraid to disclose for fear of losing the study abroad / internship opportunity.
- EAP is not available for CIDA interns and Intercultural Learning is insufficient in dealing with personal sexual or mental health needs.
NOT ENOUGH QUANTITATIVE DATA

- In three months of research, very little data has surfaced regarding the experiences of young travellers with mental/sexual health complications and experiences with violence.

- However, generous amounts of anecdotal data is available locally. We need more research!

- Current pre-departure training programs in most organizations have inadequate information on mental health, sexual health and sexual violence.
**Discussion Questions**

- What can be done to help prevent the negative consequences of sexual assault for young travellers? What policies should be in place if it happens?
- What can we do to improve mental health awareness and information for youth who are going abroad? How can we make them comfortable disclosing pre-existing mental health challenges?
- What is the role of the organization in training youth to understand issues of race/class/gender in the context of intercultural sexual relationships? What else can we say besides: “bring condoms”?
- What if we have or suspect that we have a possible mental health emergency with an intern?
**SOME HELPFUL HINTS**

- Build bridges with local community organizations. Most organizations do not have the capacity to address mental and sexual health issues with international staff. Call your local sexual assault crisis centre or youth mental health advocacy organization for more information. Your provincial AIDS Coalition or Family Planning Clinic can be a good resource.
- Find effective ways to reduce stigma within your organizations.
- Youth with a history of mental un-health have a right to employment and equal treatment. *History of addiction or mental illness is not a cause for dismissal.* This is a human rights issue and should be treated as such, in your risk management policies.
- Find effective ways to discuss these issues with travellers before they depart and when they come home.
- Build on existing pre-departure training programs in order to address existing risks with progressive approaches to mental and sexual health promotion.
For more information:

Contact your local community health promotion centres.

Bring up the issue of travel and health with your colleagues... Ask questions and make space for positive discussion about travel and health.

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